

# SYSTEM ADMINISTRATORS/ADM SUPERVISORS GUIDE: AMBULATORY DATA MODULE (ADM), VERSION 3.0

# D/SIDDOMS II



### Delivery Order #111, FY01 Software Infrastructure Support

### Submitted in Response to: D/SIDDOMS II Contract DASW01-98-D-0032

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31 Jul 2002

### RECORD OF CHANGE

This record is maintained throughout the life of the document; each published update is recorded. A Change Package (reissue of changed pages only) carries change bars in the page margins to identify differences from the preceding issue. Due to the scope of change that necessitates a Revision (reissue of entire document), a Revision does not carry change bars.

ISSUE	DATE	SUMMARY DESCRIPTION	REFERENCE DATA
Draft	19 Jul 2002	Alpha draft.	CHCS-SY ETU 6.0
			DO 111, FY01 Software Infrastructure Support, D2-SIS1-5006
Final	31 Jul 2002	Final submittal.	CHCS-SY_ETU 6.0 DO 111, FY01 Software Infrastructure Support, D2-SIS1-5006

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### 1. Introduction

### 1.1. Ambulatory Data Module (ADM) Background

The primary objective of the ADM is to transmit outpatient data to the central Department of Defense (DoD) database through the Standard Ambulatory Data Report (SADR). The inherent data collection strategy of ADM is to create an encounter record for each outpatient appointment. The encounter record is an online data entry form whereby the data items documented by providers are compiled in the military treatment facility (MTF) database through the Composite Health Care System (CHCS). Since the deployment of the Ambulatory Data System (ADS), some MTFs have developed their own alternatives to this encounter-form-based method of data collection. For example, Tripler Army Medical Center in Hawaii used a CHCS screen, called GT ADS, to collect data similar to that required in ADS Version 1.0.

The CHCS II Program Office then tasked the Tri-Service Medical Systems Support Center (TMSSC) software development team to continue development of the GT ADS product. The TMSSC team enhanced and modified the product to meet the ADS Version 2.1 specifications. The product was originally delivered under the name of KG-ADS because the TMSSC namespace "K" in CHCS is used for the Government transportable. When the TMSSC organization was dissolved on 1 October 2001, Science Applications International Corporation (SAIC) took over the development and maintenance of KG-ADS, and per the request of the Clinical Information Technology Program Office (CITPO), changed the name of the software to the Ambulatory Data Module (ADM). CHCS is the ADS front-end system.

ADM Version 3.0 will allow the site to extract required data from CHCS into several flat files for export to service-specific agencies. This extract will include SADR, Third Party Outpatient Collections System (TPOCS), Medical Services Accounting (MSA), and Patient Satisfaction Survey data. This transmission of records through the CHCS Electronic Transport Utility (SY\_ETU) eliminates the need for ADS servers. New entries are defined within SY\_ETU. Once created, these entries will automatically send the flat files to all designated off-board systems.

The data collected by ADM is included in the SADR, MSA, and TPOCS extracts each night. Error messages are generated to detail what records did not transmit successfully. ADM tracks those CHCS appointments that do not have an associated ADM record.

### 1.2. Using This Document

#### 1.2.1 Responsibility/Function Matrix

This document is set up in order of functions performed by the ADM administrator/supervisor rather than in menu path order. Refer to Table 1-1.

All functions in this guide use two main menus: 1) the Ambulatory Data Module Main Menu (ADM) (Section 2.1) and 2) the Ambulatory Data Collection Manager Menu (Section 2.2).

Prior to enabling clinics to complete ADM encounters, ADM must be configured for use in the clinics. The ADM administrator/supervisor needs to identify the hospital divisions and clinics for required configuration parameters, module customization, and user access in ADM: This guide defines responsibilities to monitor and maintain ADM data quality. Additional tools are

provided to assist the ADM administrator/supervisor in monitoring and addressing compliance and data-quality issues.

 Table 1-1.
 ADM Administrator/Supervisor Responsibilities

Task		Section
Identify the hospital divisions that have clinics using ADM.	3	Edit ADM Site Parameters (5) Option – ADM Main Menu
Manage and control the picklist of ADM clinics that automatically create ADM records for appointments.	4	Edit ADM Interface Clinics (6) Option – ADM Main Menu
Create and define ADM Mail Groups through the CHCS Mail Group Edit (MGE) option for coding and insurance issues.	5	MailGroup Preferences (7) Option – ADM Main Menu
Establish default clinic responses to be displayed in the ADM encounter for ease of completion.	6	Manage Clinic Defaults (4) Option
Provide user access to multiple clinics.	7	User Access to Multiple Clinics (9) Option
Establish clinic-specific code reference lists for providers to access as required.	8	Manage Diagnosis Selection List (2) Option
Copy an established list to other clinic profiles.		
Print the lists to a standard CHCS device.		
	9	Manage Procedure Selection List (3) Option
	10	Manage Evaluation & Management Codes (1) Option
Establish and replace For Clinic Use Only descriptions/levels previously imported from ADM.	11	Manage For Clinic Use Only Parameters (7) Option
Create a printable encounter form as a data collection contingency when CHCS is unavailable.	12	Encounter Form Designer (5) Option – ADM Main Menu
Monitor file/record transmissions and identify records for data/coding correction.	13	ADM Interface Error Menu (6) Option
ADM SADR Manual Extract	14	ADM SADR Extract Recovery (8) Option

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Task		Section
View available ADM reports on individual providers, clinics, and patients, as well as clinical management reports on frequently used diagnoses and procedures.	15	Ambulatory Data Reports (2) Option  – ADM Main Menu

#### 1.2.2 Document Conventions

The screen captures in this guide assume that the ADM administrator/supervisor holds all ADM security keys.

**Bold** font indicates data entry. Press **<Enter>** after data entry at all prompts.

If your keyboard is mapped for the VT320 Select key:

- Press **<End>** instead of **<Select>**.
- Press <Num Lock>-Backspace instead of <PF1>-Backspace or <Enter>, then the Spacebar twice

Generally, you can press **<Enter>** without selecting an option in order to advance to the next prompt.

**Menu Path:** shows the navigation from log-on.

Type the **number** of the selected option at the menu prompt to access the option. Options are accessed through the Ambulatory Data Collection Manager Menu unless "– ADM Main Menu" appears in the main section title.

### 1.3. Points of Contact for Technical Support

SAIC now supports and develops ADM (previously a product of TMSSC). The Military Health System (MHS) Help Desk provides a 24-hour toll-free technical support to MTFs currently using this product.

Technical Support Center Phone Numbers		
Location	Phone Number	
Commercial	(210) 767-5250	
Continental United States (CONUS)	(800) 600-9332	
Outside Continental United States (OCONUS)	ACCESS + 866-637-8725	

In addition, MHS Help Desk includes a web site, <a href="http://www.mhs-helpdesk.com/">http://www.mhs-helpdesk.com/</a>, for further assistance.

### 2. Primary Menus

All functions in this guide use two main menus: 1) the Ambulatory Data Module Main Menu (ADM) and 2) the Ambulatory Data Collection Manager Menu. Options are accessed through the Ambulatory Data Collection Manager Menu unless "— ADM Main Menu" appears in the main section title.

### 2.1. Ambulatory Data Module Main Menu

- 1. Log in to CHCS as usual with the authorized Access and Verify codes.
- 2. Access the Ambulatory Data Module Main Menu.

**Menu Path:** Any Main Menu → ADM (Ambulatory Data Module Main Menu)

If ADM is not the primary menu, type **ADM**.

The standard Ambulatory Data Module Main Menu displays (Figure 2-1).

- 1 ADM Data Entry Menu
- 2 Ambulatory Data Reports
- 3 Patient Master Problem List
- 4 Ambulatory Data Collection Manager Menu
- 5 Edit ADM Site Parameters
- 6 Edit ADM Interface Clinics
- 7 MailGroup Preferences

Select Ambulatory Data Module Option:

Figure 2-1. Ambulatory Data Module Main Menu

# 2.2. Ambulatory Data Collection Manager Menu (4) Option – ADM Main Menu

Access the Ambulatory Data Collection Manager Menu (4) option on the ADM Main Menu.

**Menu Path:** Any Main Menu  $\rightarrow$  ADM (Ambulatory Data Module Main Menu)  $\rightarrow$  4 (Ambulatory Data Collection Manager Menu)

**Security Key:** KG ADS MANAGEMENT

Type 4 to select the option.

The Primary Location, Provider, and Allowable Divisions fields in the CHCS User file and the KG User Access file control access to clinics in this menu.

The Ambulatory Data Collection Manager Menu displays (Figure 2-2).

1 Manage Evaluation & Management Codes 2 Manage Diagnosis Selection List 3 Manage Procedure Selection List 4 Manage Clinic Defaults Encounter Form Designer 5 6 ADM Interface Error Menu 7 Manage For Clinic Use Only Parameters 8 ADM SADR Extract Recovery User Access to Multiple Clinics Select Ambulatory Data Collection Manager Menu Option:

Figure 2-2. Ambulatory Data Collection Manager Menu

### 3. Edit ADM Site Parameters (5) Option – ADM Main Menu

The Edit ADM Site Parameters (5) option on the ADM Main Menu allows the ADM administrator/supervisor to perform the following tasks:

- Modify the site parameters for the SADR, TPOCS extracts, the version year for International Classification of Diseases, 9<sup>th</sup> Revision (ICD-9), and Current Procedural Technology/Health Care Financing Administration Common Procedure Coding System (CPT/HCPCS) installed files.
- Add clinical options to define, add, or edit a Patient Master Problem List on the individual CHCS Host platform.
- Print a Custom Standard Form 600, if the site has installed and configured this custom software.

ADM Version 3.0 includes an end-of-day (EOD) processing interface that can be set to Active to ensure that EOD processing is done once the ADM encounter has passed all edit and business rule checks and been filed as a completed encounter.

Access the Edit ADM Site Parameters (5) option on the ADM Main Menu.

**Menu Path:** Any Main Menu  $\rightarrow$  ADM (Ambulatory Data Module Main Menu)  $\rightarrow$  5 (Edit ADM Site Parameters)

**Security Key:** KG IMM SYSTEM (Does not apply to the training environment.)

The ADM Site Parameters screen displays (Figure 3-1).

```
ADM SITE PARAMETERS: 1

Divisions Producing SADR and TPOCS Data Extracts
Division TPOCS DMIS ID Group DMIS ID

ICD-9 Download Year: 2001
CPT-4 Download Year: 2001

Facility-defined response to UPDATE PROBLEM LIST: YES
Facility-defined response to CREATE CUSTOM SF600: NO
Display Pending As Selectable: NO

Ask for Help = HELP Screen Exit = F10 File/Exit = D0 INSERT OFF
```

Figure 3-1. ADM Site Parameters Screen

#### 3.1. Add New Divisions to ADM Site Parameters

Perform this procedure any time a new division is added to CHCS if the division has clinics that are expected to complete ADM encounters.

1. Access the Edit ADM Site Parameters (5) option on the ADM Main Menu.

**Menu Path:** Any Main Menu  $\rightarrow$  ADM (Ambulatory Data Module Main Menu)  $\rightarrow$  5 (Edit ADM Site Parameters)

#### 2. ADM SITE PARAMETERS:

Enter the site name (or number), or type? or?? to display a picklist of available sites.

Within the ADM Site Parameters screen, the ADM administrator/supervisor can list all available divisions. A SADR extract is automatically generated for all divisions listed. A TPOCS extract cannot be produced unless that division is listed first. The data for the TPOCS extract depends on the SADR extract being created. At least one ADM division must be defined in order to use the TPOCS Extract Interface.

#### 3. ICD-9 Download Year:

Enter the year in which the last download occurred. Perform this action annually after each ICD-9 update.

#### 4. CPT-4 Download Year:

Enter the year in which the last download occurred. Perform this action annually after each CPT-4 update.

### 5. Facility-defined response to UPDATE PROBLEM LIST:

Enter the appropriate response for the facility. Type **YES** to prompt the provider to add the diagnoses entered in the ADM encounter to the patient's picklist of health problems and to note the date the patient was diagnosed, the status of the problem, and pertinent clinic information

#### 6. Facility-defined response to CREATE CUSTOM SF600:

Enter the appropriate response for the facility. Type **YES** to prompt the user to complete/print a Custom Standard Form 600 if the site has installed and configured this custom software.

### 7. Display Pending As Selectable:

Enter the appropriate response for the facility. Type **YES** to allow providers to select appointments that are pending and have not been checked in through the Individual Patient Check-in (IPC) or Multiple Check-in by Default (MCD) options on the Patient Appointment and Scheduling (PAS) subsystem. This also properly completes the EOD processing to be included in the monthly statistical reports and the Workload Assignment Module (WAM) template report.

8. Type **F**, or use the left- and right-arrow keys to highlight the File/Exit action, or press **Enter>** (or **Do**) to select the File/Exit action to file (save) the changes and exit the

option. Or press **<F10>** to abort the process and not store any changes made to the parameters.

#### 3.2. Delete Divisions from ADM Site Parameters

The ADM administrator or supervisor may need to remove an inactivated division. Although the division can be deleted from the ADM Site Parameter, the system retains data for the division. Removing the division from the ADM Site Parameters excludes its data from the SADR transmission.

1. Access the Edit ADM Site Parameters (5) option on the ADM Main Menu.

**Menu Path:** Any Main Menu  $\rightarrow$  ADM (Ambulatory Data Module Main Menu)  $\rightarrow$  5 (Edit ADM Site Parameters)

2. Use the arrow keys to position the cursor next to the division to be deleted, press **Enter**>, then press the **Spacebar** twice.

Alternately on a PC keyboard, press **<Num Lock>-Backspace** simultaneously to delete the entry.

3. OK to DELETE the entire TESTOR AFB GA (ACC) Entry? N//  ${\bf Y}$ 

Type **Y** to confirm the deletion of the division.

4. Select the File/Exit action to file the changes and exit the option.

The division is deleted and you return to the Ambulatory Data Module Main Menu.

### 4. Edit ADM Interface Clinics (6) Option – ADM Main Menu

The Edit ADM Interface Clinics (6) option on the ADM Main Menu allows the ADM administrator/supervisor to manage and control the picklist of ADM clinics that automatically create ADM records for appointments:

- Identify ADM clinics for SADR transmission and reporting.
- Modify, add, or delete clinics at the site that create SADR and TPOCS extract files for transmittal to the appropriate system server.

The nightly SADR transmission automatically creates ADM records for clinic appointments with the status of Cancel, No Show, or LWOBS (left without being seen).

Access the Edit ADM Interface Clinics (6) option on the ADM Main Menu.

**Menu Path:** Any Main Menu  $\rightarrow$  ADM (Ambulatory Data Module Main Menu)  $\rightarrow$  6 (Edit ADM Interface Clinics)

**Security Key:** KG IMM SYSTEM (Does not apply to the training environment.)

The Edit ADM Clinics screen displays (Figure 4-1).

```
ADM SITE PARAMETERS: DT&E EDIT ADM CLINICS Clinics entered in this multiple will have their NO-SHOW, CANCEL and LWOBS appointments automatically generate KG ADC DATA file entries.

Clinic:

Ask for Help = HELP Screen Exit = F10 File/Exit = DO
```

Figure 4-1. Edit ADM Clinics Screen

#### 4.1. Add New ADM Interface Clinics

The clinic administrator/supervisor should complete this procedure prior to activating a new ADM-collection clinic and creating ADM encounters for a clinic that is new in CHCS.

1. Access the Edit ADM Interface Clinics (6) option on the ADM Main Menu.

**Menu Path:** Any Main Menu  $\rightarrow$  ADM (Ambulatory Data Module Main Menu)  $\rightarrow$  6 (Edit ADM Interface Clinics)

#### 2. Clinic:

Enter the name of the new clinic. If multiple clinics match the search string, a picklist displays.

Alternately, enter part or all of a Medical Expense and Performance Recording System (MEPRS) code to display a picklist of associated clinics.

3. Are you adding 'FAMILY PRACTICE CLINIC' as a new ADM CLINIC (the  $2^{nd}$  for this SITE PARAMETER)? Y//

Press **<Enter>** to accept the YES default and add a new clinic. You return to the Edit ADM Clinics screen

- 4. Continue to add the clinics that will use ADM.
- 5. Select the File/Exit action to file the changes and exit the option.

#### 4.2. Delete an ADM Clinic

1. Access the Edit ADM Interface Clinics (6) option on the ADM Main Menu.

**Menu Path:** Any Main Menu  $\rightarrow$  ADM (Ambulatory Data Module Main Menu)  $\rightarrow$  6 (Edit ADM Interface Clinics)

2. Use the arrow keys to place the cursor on the clinic name.

The clinic name displays on a new screen (Figure 4-2).

```
ADM CLINICS: FAMILY PRACTICE CLINIC EDIT ADM CLINICS -- CONTINUATION

ADM CLINICS: FAMILY PRACTICE CLINIC
```

### Figure 4-2. Edit ADM Clinics – Continuation Screen

3. Use the arrow keys to place the cursor beside the clinic to be deleted, press **Enter>**, then press the **Spacebar** twice.

Alternately on a PC keyboard, press **<Num Lock>-Backspace** simultaneously to delete the entry.

4. Are you sure that you want to delete the entire 'Family Practice Clinic' Entry? **Y**Type **Y** to confirm the removal of the clinic. You return to the Edit ADM Clinics screen and the clinic is removed from the ADM clinic list.

5. Select the File/Exit action to file the changes and exit the option.

### 4.3. Add New ADM Interface Clinics in a New Session

Additional clinics may be added at a later time. To ensure that other clinics are not overwritten during the process, use the arrow keys to place the cursor on the line below the last clinic listed on the Edit ADM Clinics screen and repeat the process for adding new clinics (refer to Section 4.1).

### 5. MailGroup Preferences (7) Option – ADM Main Menu

The MailGroup Preferences (7) option on the ADM Main Menu allows an ADM administrator/supervisor to define the default mail groups for the clinic to resolve coding and insurance issues. The ADM administrator/supervisor can list the mail groups previously created through the CHCS MailGroup Edit (MGE) option.

### **5.1.** Add New Mail Group Division

1. Access the MailGroup Preferences (7) option on the ADM Main Menu.

**Menu Path:** Any Main Menu  $\rightarrow$  ADM (Ambulatory Data Module Main Menu)  $\rightarrow$  7 (MailGroup Preferences)

Table 5-1 briefly describes the fields to be populated in order to use the CHCS mail service for providing coding information and insurance updates to providers and other ADM users.

Field	Description
Division	Identifies divisions in which mail groups have been established in CHCS for correcting coding and insurance issues.
Coders	Defines specific mail groups by division for correcting encounter forms with coding issues.
Insurance	Defines specific mail groups by division for sending patient insurance information to the mail group responsible for updating the patient's insurance file entry when necessary.

Table 5-1. CHCS Mail Service Fields

#### 2. Division:

- a. Type the name of the hospital division for which the mail groups were created.
- b. Or type? to display a picklist of available ADM divisions.
  - 1) Use the up-and down-arrow keys to scroll through the list.
  - 2) Press **<Select>** (or **<End>**) to select the division.

The ADM MailGroup Preferences screen displays with a confirmation message (Figure 5-1).

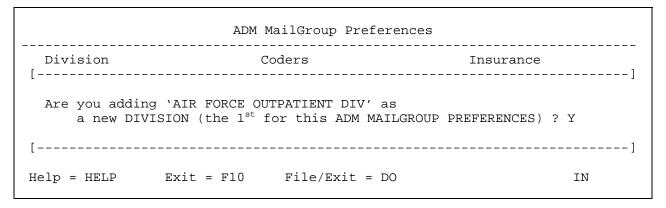


Figure 5-1. ADM MailGroup Preferences Screen

3. Are you adding 'AIR FORCE OUTPATIENT DIV' as a new DIVISION (the 1<sup>st</sup> for this ADM MAILGROUP PREFERENCES)? Y

Press **<Enter>** to accept the YES default or type **N** if the division is incorrect.

4. Coders:

Type the name of the Mail Group supplied by the CHCS systems personnel identified and created in the MGE option as the Coders mail group.

5. Insurance:

Type the name of the Mail Group supplied by the CHCS systems personnel identified and created in the MGE option as the Insurance mail group.

- 6. Continue to enter the divisions and mail groups as applicable.
- 7. Select the File/Exit action to file the mail group preferences and exit the option.

### 5.2. Delete a Mail Group Division

To remove divisions inactivated from service:

1. Access the MailGroup Preferences (7) option on the ADM Main Menu.

**Menu Path:** Any Main Menu  $\rightarrow$  ADM (Ambulatory Data Module Main Menu)  $\rightarrow$  7 (MailGroup Preferences)

- 2. Use standard CHCS key navigation to scroll through the list.
- 3. Press <**PF1>-Backspace** (or <**Num Lock> Backspace**) to delete the division.
- 4. Type **Y** to confirm deletion of the division.
- 5. Select the File/Exit action to file the mail group preferences and exit the option.

### 6. Manage Clinic Defaults (4) Option

The Manage Clinic Defaults (4) option on the Ambulatory Data Collection Manager Menu allows an ADM administrator/supervisor to define the clinic default responses to the Diagnosis/Procedure Primary Sort, Diagnosis/Procedure Secondary Sort, APV (Ambulatory Procedure Visit), Work Related, Disposition, and E&M Code fields on the encounter form.

Access the Manage Clinic Defaults (4) option on the Ambulatory Data Collection Manager Menu.

**Menu Path:** Any Main Menu → ADM (Ambulatory Data Module Main Menu) → 4 (Ambulatory Data Collection Manager Menu) → 4 (Manage Clinic Defaults)

**Security Key:** KG ADS MANAGEMENT

The ADM Clinic Defaults screen displays (Figure 6-1).

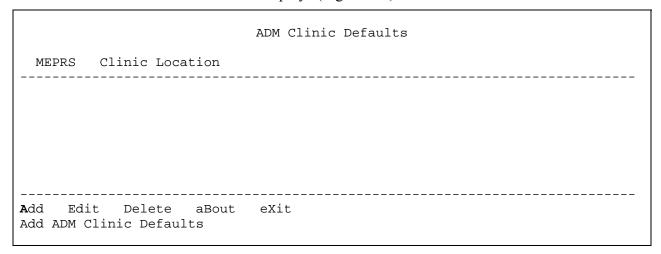


Figure 6-1. ADM Clinic Defaults Screen

### **6.1.** Add ADM Clinic Defaults (Add) Action

- 1. Type **A** or use the right- and left-arrow keys to highlight the Add ADM Clinic Defaults action.
- 2. Select CLINIC:

Type the clinic name or select a clinic. (Refer to Section 4.1, step 2 for the process steps.)

3. Verify To Add CLINIC NAME OR (Y/N) N// Y

Type Y to accept the default clinic name, or type N to change the clinic name.

The Clinic Defaults and Previous Record prompts display (Figure 6-2).

Figure 6-2. Clinic Defaults and Previous Record Prompts

**Note:** Defaults can be selected for the Clinic Defaults and Previous Record fields at the clinic level only; they cannot be customized at the provider level.

### 4. Previous Record: Y

Type  $\mathbf{Y}$  to display the data used in a patient's previous ADM encounter within the last 30 days when the current ADM encounter is created in the same clinic as the previous encounter, or type  $\mathbf{N}$  to disable this feature.

#### 5. Clinic Defaults: Y

Type Y to customize the clinic default responses for the Diagnosis/Procedure Primary Sort, Diagnosis/Procedure Secondary Sort, APV, Work Related, Disposition, and E&M Code fields on the encounter form, or type N to disable the default responses for the selected clinic.

The Clinic Defaults screen (Figure 6-3) displays. Shaded fields indicate required entries when the Clinic Defaults field is set to YES.

Clinic Location: NI CLINIC1 OR

-----

Previous Record: YES Clinic Defaults: YES

Diagnosis/Procedure Primary Sort : SEQUENCE NUMBER APV : NO Diagnosis/Procedure Secondary Sort : DESCRIPTION Work Related: NO

Disposition: RELEASED W/O LIMITATIONS

E & M Code :

Diagnoses Description Priority

Procedures Description Associated Priority

### Figure 6-3. Clinic Defaults Screen

6. Enter appropriate responses for each required field and for any additional fields to be used as the clinic default responses.

Table 6-1 describes the each field.

**Table 6-1.** Clinic Default Fields

Field	Description
Diagnosis/Procedure Primary Sort	Establishes the initial sort sequence for the codes that display in the encounter. Choices are:
	1 SEQUENCE NUMBER
	2 DESCRIPTION
	3 DISPLAY TEXT
APV	Indicates that the patient's visit qualifies as an Ambulatory Procedure Visit or Same Day Surgery event. Choices are YES or NO.
Diagnosis/Procedure Secondary Sort	Defines the second-level sort sequence. The choices are the same as the primary sort but cannot duplicate a selection in the primary sort.
Work Related	Indicates if the visit addresses a work-related injury. Choices are YES or NO.

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Field	Description
Disposition	Indicates patient's post-visit status. The most frequently used disposition can be set as the default in the encounter. Choices are:
	ADMITTED 95
	EXPIRED 96
	IMMEDIATE REFERRAL 90
	LEFT AGAINST MEDICAL ADVICE 06
	LEFT W/O BEING SEEN 97
	RELEASED W/ WORK DUTY LIMITATIONS 85
	RELEASED W/O LIMITATIONS 91
	SICK AT HOME/QUARTERS 05
E&M Code	These codes document the level of care and the complexity of the visit. Select from the entire range of E&M codes. Refer to Section 10.2 for the process steps to select E&M codes.
Diagnoses	Reason for the patient's visit. The diagnosis must be prioritized, must be unique, and must be listed in sequential order, ranging from 1 to 4 in the Priority field. Select from the entire list of Diagnosis codes. Refer to Section 8.1.2.2 for the process steps to select Diagnosis codes.
Procedures	These codes document when a physical procedure has been performed on a patient during an encounter. The code must have an Associated Priority with a confirmed diagnosis. Refer to Section 9.1.2.2 for the process steps to select Procedure codes.

**Note**: The program checks to prevent Inactive codes from being entered. If the current defaults contain codes that have subsequently become Inactive, they are flagged.

- 7. When the last default field has been added, continue to press **Enter>** until the File/Exit action displays.
- 8. Select the File/Exit action to file the selected clinic defaults and exit the action. You return to the ADM Clinic Defaults screen.

### **6.2.** Edit ADM Clinic Defaults (Edit) Action

You can change or remove existing field entries. A clinic picklist displays.

- 1. Use the up- and down-arrow keys to highlight the clinic from the clinic picklist.
- 2. Press **<Select>** (or **<End>**) to select the clinic to edit.

- 3. Type **E** or use the right- and left-arrow keys to highlight the Edit action.
- 4. Press **Enter**> or use the up- and down-arrow keys to advance to the field to be edited or a line to be added.
- 5. Use standard CHCS key functions to delete the existing field entries.
  - Section 1.2.2 Document Conventions explains standard CHCS key functions.
- 6. When the last field has been added or corrected, continue to press **Enter>** until the File/Exit action displays.
- 7. Select the File/Exit action to file the changes and exit the action.

You return to the ADM Clinic Defaults screen.

### 6.3. Delete a Clinic From the Clinic Defaults (Delete) Action

The ADM administrator/supervisor can delete a clinic from the list of clinics defined in the Clinic Defaults file.

- 1. Use the up- and down-arrow keys to highlight the clinic from the clinic picklist.
- 2. Press **<Select>** (or **<End>**) to select the clinic.
- 3. Type **D** or use the right- and left-arrow keys to highlight the Delete action to remove any field previously entered.
- 4. Verify To Delete Clinic Defaults (Y/N) N//

Type **Y** to confirm the deletion.

The ADM Clinic Defaults screen displays again without the deleted clinic listed.

### **6.4.** Exit the Option (Exit) Action

Type X to use the right- and left-arrow keys to highlight the eXit action to return to the Ambulatory Data Collection Manager Menu.

### 7. User Access to Multiple Clinics (9) Option

The User Access to Multiple Clinics (9) option on the Ambulatory Data Collection Manager Menu allows an ADM administrator/supervisor or administrator to grant a user access to multiple clinics. This feature depends on the CHCS user profile and the allowable divisions assigned to the user. If the ADM administrator/supervisor has only one division allowed, that manager may only assign clinics in the allowable division to the user.

Super-users and clinical coders using ADM may be required to access more than one clinic for administrative or functional purposes. For example, a clinical coder may be assigned to code all ADM records for an orthopedic clinic and several family practice clinics within the division.

Access the User Access to Multiple Clinics (9) option on the Ambulatory Data Collection Manager Menu.

**Menu Path:** Any Main Menu  $\rightarrow$  ADM (Ambulatory Data Module Main Menu)  $\rightarrow$  4 (Ambulatory Data Collection Manager Menu)  $\rightarrow$  9 (User Access to Multiple Clinics)

**Security Keys:** KG IMM SYSTEM

KG ADS MANAGEMENT

The ADM User Access screen displays (Figure 7-1).

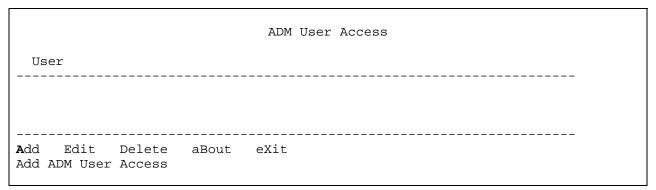


Figure 7-1. ADM User Access Screen

### 7.1. Add ADM User Access (Add) Action

- 1. Type **A** to or use the right- and left-arrow keys to highlight the Add ADM User Access action.
- 2. User:

Type the user's name.

3. Verify To Add DOCTOR, JOHN (Y/N) N//

Type Y to verify the user. The Hospital Location Access field displays (Figure 7-2).

```
USER: DOCTOR, JOHN

HOSPITAL LOCATION ACCESS

Help = HELP    Exit = F10    File/Exit = D0
```

Figure 7-2. Hospital Location Access Field

#### 4. HOSPITAL LOCATION ACCESS

Enter the MEPRS code or the name of the Hospital Location to which the user is to be assigned using one of the following methods:

- a. If the MEPRS code is known, type the four-character code. The code and description populate the field.
- b. If the clinic location name is known, type the first few characters of the clinic name.
- c. Type ?? to display the entire clinic location picklist.
  - 1) Use the up- and down-arrow keys to move through the picklist.
  - 2) Press **<Select>** (or **<End>**) to select the clinic.

A new clinic location confirmation prompt displays (Figure 7-3).

Figure 7-3. New Clinic Location Confirmation Prompt

- 5. Are you adding 'Clinic Location' as a new HOSPITAL LOCATION? Y// Press **<Enter>** to accept the default response of YES.
- 6. Repeat the process for each clinic to which the user needs access.
- 7. When the last clinic has been added to the user's access list, press **Enter>** to file the clinic selections.

You return to the ADM User Access screen.

### 7.2. Edit ADM User Access (Edit) Action

You can add or remove user access to a clinic. A picklist displays of previously entered users.

- 1. Use the up- and down-arrow keys to highlight the user on the picklist.
- 2. Press **Select>** (or **End>**) to select the user to edit.
- 3. Type **E** or use the left- and right-arrow keys to highlight the Edit action.

The entire entry for the selected user displays with all user-assigned clinics (Figure 7-4).

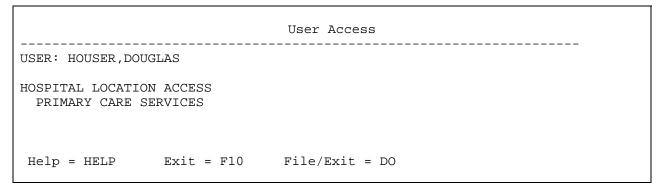


Figure 7-4. User Access Screen

- 4. Use the arrow keys to position the cursor on the first character of the hospital location name to be edited for the user. Press the **Spacebar** twice.
  - Alternately on a PC keyboard, press **<Num Lock>-Backspace** simultaneously to delete the entry.
- 5. Type **Y** to confirm the deletion and complete the deletion of the hospital location from the user's access, or type **N** to abort the edit session.
- 6. Select the File/Exit action to file the changes and exit the option.

### 7.3. Delete ADM User Access (Delete) Action

You can delete user access without removing multiple hospital locations.

- 1. Use the up- and down-arrow keys to highlight the user from the user picklist.
- 2. Press **<Select>** (or **<End>**) to select the user to delete.
- 3. Type **D** or use the left- and right-arrow keys to highlight the Delete action.
  - The WARNING: Delete User Access screen displays (Figure 7-5).

```
>>> WARNING: Delete User Access <<<
[------]
Delete User Access: KOZAK,STEPHEN

Verify To Delete User Access (Y/N) N//
```

Figure 7-5. WARNING: Delete User Access Screen

4. Verify To Delete User Access (Y/N) N// Y

Type Y to delete the user and exit the action. The ADM User Access screen displays again, but with a user listed (Figure 7-6).

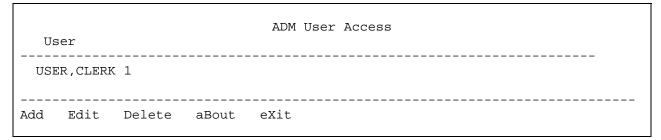


Figure 7-6. ADM User Access Screen with User Listed

### 7.4. Exit the Option (eXit) Action

Type **X** or use the left- and right-arrow keys to highlight the eXit action and return to the Ambulatory Data Collection Manager Menu.

### 8. Manage Diagnosis Selection List (2) Option

You can prepare a clinic to use ADM by setting up the electronic diagnosis and procedure code reference lists and the For Clinic Use Only (FCUO) items and levels. The most likely personnel to do the setup are ADM clinic supervisors or personnel who manage the ADM form overlays for each clinic. Each reference list uses a set of options to create, print, copy, or delete selection lists.

ADM refers to the clinic diagnoses lists as Diagnosis Selection Lists. The Manage Diagnosis Selection List (2) option on the Ambulatory Data Collection Manager Menu provides options that allow an ADM administrator/supervisor to create, edit, print, copy, or delete Diagnosis Selection Lists. The user's allowable divisions in the CHCS User Profile or within the ADM User Access entries determine the user's access to the selection lists for ADM clinics within an MTF division.

Access the Manage Diagnosis Selection List (2) option on the Ambulatory Data Collection Manager Menu.

**Menu Path:** Any Main Menu  $\rightarrow$  ADM (Ambulatory Data Module Main Menu)  $\rightarrow$  4 (Ambulatory Data Collection Manager Menu)  $\rightarrow$  2 (Manage Diagnosis Selection List)

**Security Key:** KG ADS MANAGEMENT

The Manage Diagnosis Selection List screen displays (Figure 8-1).

- 1 Create Clinic Diagnosis Selection List
- 2 Print Clinic Diagnosis Selection List
- 3 Copy Clinic Diagnosis Selection List
- 4 Delete Clinic Diagnosis Selection List

Select Manage Diagnosis Selection List Option:

Figure 8-1. Manage Diagnosis Selection List Screen

### 8.1. Create Clinic Diagnosis Selection List (1) Option

The Create Clinic Diagnosis Selection List (1) option on the Manage Clinic Diagnosis Selection List screen allows you to title and categorize lists of codes.

Clinic diagnosis selection lists are titled and categorized at user discretion. For example, an orthopedic clinic may want a diagnosis selection list titled Lower Leg, with three categories of lists titled Knee, Ankle, and Foot.

1. Access the Create Clinic Diagnosis Selection List (1) option on the Manage Diagnosis Selection List screen.

**Menu Path:** Any Main Menu → ADM (Ambulatory Data Module Main Menu) → 4 (Ambulatory Data Collection Manager Menu) → 2 (Manage Diagnosis Selection List) → 1 (Create Clinic Diagnosis Selection List)

2. Select Diagnosis Selection List Name:

Type a name for this diagnosis selection list. The title must be 3 to 30 characters long (e.g., Lower Leg).

3. Are you adding 'title' as a new DIAGNOSIS SELECTION LIST? Y

Type **Y** to confirm.

#### 4. Clinic:

Type the first four letters of the clinic (e.g., ORTH for the Orthopedic clinic) or MEPRS code (e.g., BGAA). A numbered clinic picklist may display. Type the clinic number.

**Note:** If the clinic is not in the ADM interface clinic picklist, a message warns that only authorized clinics are available and a Help prompt displays:

```
Only authorized clinics may be selected. Want more help? NO// (NO)
```

The Diagnosis Selection List Maintenance screen displays (Figure 8-2).

```
Diagnosis Selection List Maintenance

Lower Leg Created: 02 Jun 2002

Clinic: ORTHOPEDIC CLINIC Modified:

No items to display

Add Help eXit

Add Categories to Selection List
```

Figure 8-2. Diagnosis Selection List Maintenance Screen – No Categories Entered

**Note:** The Edit and Delete actions display on the action bar after categories are added.

#### 8.1.1 Add New Category to Selection List (Add) Action

- 1. Type **A** or use the left- and right-arrow keys to highlight the Add action.
- 2. Enter a New Category Name:

Type a name (e.g., Ankle). The title can be up to 30 characters long.

3. Sort Sequence:

Type a number between 1 and 999, or press **Enter>** to accept the alphabetical order default.

The sequence number determines the order in which the diagnosis list categories display to the provider. The sequence defaults to alphabetical order if you do not type a number.

4. Enter a New Category Name:

Continue entering information, or press **Enter>** to stop entering categories.

The category names display in prescribed order. The cursor is positioned next to the first item. Each category already has an asterisk next to it, indicating that all categories are selected.

### 8.1.2 Edit Existing Categories on Diagnosis Selection List (Edit) Action

**Note:** The Edit and Delete actions display on the action bar after categories are added (Figure 8-3). Diagnosis codes can be deleted at any time.

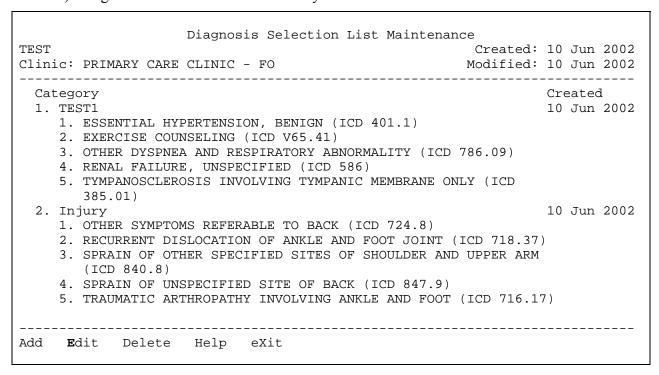


Figure 8-3. Diagnosis Selection List Maintenance Screen – With Categories Entered

#### 8.1.2.1. Change the Category Order

1. Type **E** or use the left- and right-arrow keys to highlight the Edit action.

Since all categories have asterisks, they are all selected. Use the up- and down-arrow keys to select just one category and press **Select>** (or **End>**) to deselect the other categories.

#### 2. Sort Sequence:

Type a number between 1 and 999, or press **Enter>** to accept the default order.

The Sort Sequence prompt displays after you enter a code number. The sequence number determines the order in which codes display to the provider. The default sequence is alphabetical with uppercase entries before lowercase entries if you do not type a sequence number.

3. Enter a New Diagnosis: **Enter>** (to bypass the prompt).

To change the sequence for multiple categories, continue as indicated above. When finished, you return to the Diagnosis Selection List Maintenance screen.

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#### 8.1.2.2. Add Diagnosis Codes

1. Type **E** or use the left- and right-arrow keys to highlight the Edit action.

Since all categories have asterisks, they are all selected. Use the up- and down-arrow keys to select just one category and press **Select** (or **End**>) to deselect the other categories.

#### 2. Sort Sequence:

Type a number between 1 and 999, or press **Enter>** to accept the default order.

#### 3. Enter a New Diagnosis:

Use one of the following methods to enter a code:

- a. Type the complete diagnosis code number.
- b. Type the first few digits of the code to display a range of codes beginning with those numbers; e.g., type 250 to display codes 250.00, 250.01, etc. Press **Enter>** to scroll through the list. Then type the diagnosis code reference number.
- c. Type the description of a symptom or affected body part (e.g., Pain, Heart, Head, etc.). A numbered picklist of related diagnosis codes displays. Press **Enter>** to scroll through the list. Then type the diagnosis code reference number.
- d. Type ?? to display a picklist of all ICD-9-CM or ICD-9 codes in the CHCS code table, starting with code #001.0. Press **Enter>** to scroll through the list. Type ^ to discontinue scrolling through the list and type the complete diagnosis code number.

**Note:** This is a Read-Only list. Since you cannot select a code, note the code number. Program logic ensures that you cannot enter inactive codes. If previously entered codes subsequently become inactive, they remain on the list, but are flagged.

#### 4. Sort Sequence:

Type a number between 1 and 999, or press **Enter>** to accept the default order.

#### 5. Display Text:

Type a customized code description. The description can be up to 45 characters long. If you do not enter a customized description, the system uses the default description.

When you have entered or bypassed the last category, you return to the Diagnosis Selection List Maintenance screen.

### 8.1.3 Delete Diagnosis Codes (Delete) Action

**Note:** The Edit and Delete actions display on the action bar after categories are added (Figure 8-3). Diagnosis codes can be deleted at any time.

- 1. Use the up- and down-arrow keys to position the cursor next to the code(s) to delete and press **<Select>** (or **<End>**).
- 2. Type **D** or use the left- and right-arrow keys to highlight the Delete action.

**CAUTION:** Use caution when deleting codes. If you select a category instead of an individual code, the system deletes the entire category list of codes without warning.

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The code is deleted and you return to the Diagnosis Selection List Maintenance screen.

### 8.1.4 Exit the Option (Exit) Action

Type **X** or use the left- and right-arrow keys to highlight the eXit action and return to the Manage Diagnosis Selection List screen.

### 8.1.5 Modify an Existing Diagnosis Code List in a New Session

1. Access the Create Clinic Diagnosis Selection List (1) option on the Manage Diagnosis Selection List screen.

**Menu Path:** Any Main Menu → ADM (Ambulatory Data Module Main Menu) → 4 (Ambulatory Data Collection Manager Menu) → 2 (Manage Diagnosis Selection List) → 1 (Create Clinic Diagnosis Selection List)

2. Select Diagnosis Selection List:

Type the name of the diagnosis selection list. The categories and codes display.

- 3. Use the up- and down-arrow keys to position the cursor next to the category(ies) or code(s) to modify. Press **Select>** (or **End>**) to select the category(ies) or code(s).
- 4. Use the Add, Edit, or Delete action to modify the list.

A series of prompts asks you to edit or add a category name and sort sequence.

- 5. Press **<Enter>** after each change or to bypass these fields without making changes.
- 6. Enter a New Diagnosis:

Enter a new diagnosis to add to the category selected using one of the methods described above. (Refer to Section 8.1.2.2.)

### 8.2. Print Clinic Diagnosis Selection List (2) Option

The Print Clinic Diagnosis Selection List (2) option on the Manage Diagnosis Selection List screen allows the ADM administrator/supervisor to print or view a predefined clinic diagnosis selection list. The option requires entry of a clinic name or MEPRS code, the standard CHCS device, and the right margin.

1. Access the Print Clinic Diagnosis Selection List (2) option on the Manage Diagnosis Selection List screen.

Menu Path: Any Main Menu → ADM (Ambulatory Data Module Main Menu) → 4 (Ambulatory Data Collection Manager Menu) → 2 (Manage Diagnosis Selection List) → 2 (Print Clinic Diagnosis Selection List)

#### 2. Select Clinic:

Type the first four letters of the clinic name or the MEPRS code. A numbered clinic picklist may display. Type the clinic number.

3. Device:

Press **Enter**> twice to display the Clinic Selection Lists screen, or type the name of the device, or type ? to display a device picklist.

The clinic codes display with their customized and original descriptions.

4. Press **Enter**> to return to the Manage Diagnosis Selection List screen.

### 8.3. Copy Clinic Diagnosis Selection List (3) Option

The Copy Clinic Diagnosis Selection List (3) option on the Manage Diagnosis Selection List screen allows the ADM administrator/supervisor to duplicate a clinic diagnosis selection list from one clinic to another. You can either add to an existing clinic diagnosis selection list or create a new one.

1. Access the Copy Clinic Diagnosis Selection List (3) option on the Manage Diagnosis Selection List screen

Menu Path: Any Main Menu → ADM (Ambulatory Data Module Main Menu) → 4 (Ambulatory Data Collection Manager Menu) → 2 (Manage Diagnosis Selection List) → 3 (Copy Clinic Diagnosis Selection List)

2. List to Copy From:

Type the name of the diagnosis selection list (e.g., Ortho), or type ?? to display the existing diagnosis selection lists.

3. List to Copy To:

Type a new title for the destination diagnosis selection list, or type ?? to display the existing diagnosis selection lists. The name must be 3 to 30 characters long (e.g., Lower Leg).

A response displays:

```
List1 will be copied to List 2 or LIST1 will be copied to NEW LIST
```

- 4. Are You Adding 'List Name' as a New Diagnosis Selection List? Y
- 5. Clinic:

Type the first four letters of the clinic. A numbered clinic picklist displays. Type the clinic number.

6. Do You Wish To Continue?

Type **Y** to continue, or press **<Enter>** to accept the NO default. You return to the Manage Diagnosis Selection List.

7. Press **Enter>** to return to the Ambulatory Data Collection Manager Menu.

### 8.4. Delete Clinic Diagnosis Selection List (4) Option

1. Access the Delete Clinic Diagnosis Selection List (4) option on the Manage Diagnosis Selection List screen.

**Menu Path:** Any Main Menu → ADM (Ambulatory Data Module Main Menu) → 4 (Ambulatory Data Collection Manager Menu) → 2 (Manage Diagnosis Selection List) → 4 (Delete Clinic Diagnosis Selection List)

2. Select Clinic Diagnosis Selection List:

Enter the name of the Diagnosis Selection List.

3. Are you Sure You Want to Delete 'List Name'?

Type Y to delete the entire list, or type N to abort the option and return to the Manage Diagnosis Selection List screen.

### 9. Manage Procedure Selection List (3) Option

The Manage Procedure Selection List (3) option on the Ambulatory Data Collection Manager Menu is similar to the Manage Diagnosis Selection List (2) option, but it pertains to CPT procedure codes instead of ICD-9 diagnosis codes. This option allows an ADM administrator/supervisor to create, print, copy, or delete procedure selection lists.

Access the Manage Procedure Selection List (3) option on the Ambulatory Data Collection Manager Menu.

**Menu Path:** Any Main Menu  $\rightarrow$  ADM (Ambulatory Data Module Main Menu)  $\rightarrow$  4 (Ambulatory Data Collection Manager Menu)  $\rightarrow$  3 (Manage Procedure Selection List)

The Manage Procedure Selection List screen displays (Figure 9-1).

1 Create Clinic Procedure Selection List
2 Print Clinic Procedure Selection List
3 Copy Clinic Procedure Selection List
4 Delete Clinic Procedure Selection List
Select Manage Procedure Selection List Option:

Figure 9-1. Manage Procedure Selection List Screen

### 9.1. Create Clinic Procedure Selection List (1) Option

The Create Clinic Procedure Selection List (1) option on the Manage Procedure Selection List screen allows you to title and categorize lists of codes. Clinic procedure selection lists are titled and categorized at user discretion. For example, an emergency room may want a procedure selection list titled Trauma, with two categories of lists titled Fractures and Burns.

1. Access the Create Clinic Procedure Selection List (1) option on the Manage Procedure Selection List screen.

**Menu Path:** Any Main Menu  $\rightarrow$  ADM (Ambulatory Data Module Main Menu)  $\rightarrow$  4 (Ambulatory Data Collection Manager Menu)  $\rightarrow$  3 (Manage Procedure Selection List)  $\rightarrow$  1 (Create Clinic Procedure Selection List)

2. Select Procedure Selection List Name:

Type a name for this procedure selection list. The title must be 3 to 30 characters long (e.g., Trauma).

- 3. Are you adding 'title' as a new PROCEDURE SELECTION LIST? Y Type Y to confirm.
- 4. Clinic:

Type the first four letters of the clinic (e.g., ORTH for the Orthopedic clinic) or MEPRS code (e.g., BGAA). A numbered clinic picklist may display. Type the clinic number.

**Note:** If the clinic is not in the ADM interface clinic picklist, a message warns that only authorized clinics are available and a Help prompt displays:

```
Only authorized clinics may be selected. Want more help? NO// (NO)
```

The Procedure Selection List Maintenance screen displays.

#### 9.1.1 Enter a New Category to the Procedure Selection List (Add) Action

- 1. Type **A** or use the left- and right-arrow keys to highlight the Add action.
- 2. Enter a New Category Name:

Type a category name (e.g., Fractures). The title can be up to 30 characters long.

3. Sort Sequence:

Type a number between 1 and 999, or press **Enter>** to accept the alphabetical order default.

The sequence number determines the order in which the procedure list categories display to the provider. The sequence defaults to alphabetical order if you do not type a number.

4. Enter a New Category Name:

Continue entering information, or press **<Enter>** to stop entering categories.

The category names display in the prescribed order. The cursor is positioned next to the first item. Each category already has an asterisk next to it, indicating that all categories are selected.

#### 9.1.2 Edit Existing Categories on Procedure Selection List (Edit) Action

**Note:** The Edit and Delete actions display on the action bar after categories are added.

## 9.1.2.1. Change the Category Order

1. Type **E** or use the left- and right-arrow keys highlight the Edit action.

Since all categories are asterisked, they are all selected. To select just one category, use the up- and down-arrow keys and press or **<Select>** (or **<End>**) to deselect the other categories.

2. Sort Sequence:

Type a number between 1 and 999, or press **Enter>** to accept the default order.

The Sort Sequence prompt displays after you enter a code number. The sequence number determines the order in which codes display to the provider. The default sequence is alphabetical with uppercase entries before lowercase entries if you do not type a sequence number.

3. Enter a New Procedure: **Enter>** (to bypass the prompt).

To change the sequence for multiple categories, continue as indicated above. When finished, you return to the Procedure Selection List Maintenance screen.

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#### 9.1.2.2. Add Procedure Codes

1. Type **E** or use the left- and right-arrow keys to highlight the Edit action.

Since all categories have asterisks, they are all selected. Use the up- and down-arrow keys to select just one category, and press **Select>** (or **End>**) to deselect the other categories.

#### 2. Sort Sequence:

Type a number between 1 and 999, or press **Enter>** to accept the default order.

#### 3. Enter a New Procedure:

Use one of the following methods to enter a code:

- a. Type the complete procedure code number.
- b. Type the first few digits of the code to display a range of codes beginning with those numbers; e.g., type 99 to display codes 99201, 99202, etc. Press **Enter>** to scroll through the list. Then type the procedure code reference number.
- c. Type the description of a symptom or affected body part (e.g., Suture, Dressing). A numbered picklist of related procedure codes displays. Press **Enter>** to scroll through the list. Then type the procedure code reference number.
- d. Type ?? to display a picklist of all CPT codes in the CHCS code table, starting with code #10040. Press **Enter>** to scroll through the list. Type ^ to discontinue scrolling through the list and type the complete procedure code number.

**Note:** This is a Read-Only list. Since you cannot select a code, note the code number.

## 4. Sort Sequence:

Type a number between 1 and 999, or press **Enter>** to accept the default order.

## 5. Display Text:

Type a customized code description. The description can be up to 45 characters long. If you do not enter a customized description, the system uses the default description.

When you have entered or bypassed the last category, you return to the Procedure Selection List Maintenance screen.

#### 9.1.3 Delete Procedure Codes (Delete) Action

**Note:** The Edit and Delete actions display on the action bar after categories are added. Procedure codes can be deleted at any time.

- 1. Use the up- and down-arrow keys to position the cursor next to the code(s) to delete and press **<Select>** (or **<End>**).
- 2. Type **D** or use the left- and right-arrow keys to highlight the Delete action.

**CAUTION:** Use caution when deleting codes. If you select a category instead of an individual code, the system deletes the entire category list of codes without warning.

The code is deleted and you return to the Procedure Selection List Maintenance screen.

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## 9.1.4 Exit the Option (eXit) Action

Type **X** or use the left- and right-arrow keys to highlight the eXit action and return to the Manage Procedure Selection List screen.

### 9.1.5 Modify an Existing Procedure Selection List in a New Session

1. Access the Create Clinic Procedure Selection List (1) option on the Manage Procedure Selection List screen.

**Menu Path:** Any Main Menu  $\rightarrow$  ADM (Ambulatory Data Module Main Menu)  $\rightarrow$  4 (Ambulatory Data Collection Manager Menu)  $\rightarrow$  3 (Manage Procedure Selection List)  $\rightarrow$  1 (Create Clinic Procedure Selection List)

2. Select Procedure Selection List:

Type the name of the procedure selection list. The categories and codes display.

- 3. Use the up- and down-arrow keys to position the cursor next to the category(ies) or code(s) to modify and press **Select>** (or **End>**).
- 4. Use the Add, Edit, or Delete action to modify the list.

A series of prompts asks you to edit or add a category name and sort sequence.

- 5. Press **Enter>** after each change or to bypass these fields without making changes.
- 6. Enter a New Procedure:

Enter a new procedure to add to the category selected using one of the methods described above. (Refer to Section 9.1.2.2.)

# 9.2. Print Clinic Procedure Selection List (2) Option

The Print Clinic Procedure Selection List (2) option on the Manage Procedure Selection List screen allows the ADM administrator/supervisor to print or view a predefined clinic procedure selection list. This option requires the clinic name or MEPRS code, the standard CHCS device, and the right margin.

1. Access the Print Clinic Procedure Selection List (2) option on the Manage Procedure Selection List screen.

**Menu Path:** Any Main Menu → ADM (Ambulatory Data Module Main Menu) → 4 (Ambulatory Data Collection Manager Menu) → 3 (Manage Procedure Selection List) → 2 (Print Clinic Procedure Selection List)

#### 2. Select Clinic:

Type the first four letters of the clinic name or the MEPRS code. A numbered clinic picklist may display. Type the clinic number.

3. Device:

Press **Enter>** twice to display the Clinic Selection Lists screen, or type the name of the device, or type ? to display a device picklist.

The clinic codes display with their customized and original descriptions.

4. Press **Enter** to return Manage Procedure Selection List screen.

## 9.3. Copy Clinic Procedure Selection List (3) Option

The Copy Clinic Procedure Selection List (3) option on the Manage Procedure Selection List screen allows the ADM administrator/supervisor to duplicate a clinic procedure selection list from one clinic to another. You can either add to an existing clinic procedure selection list or create a new one.

1. Access the Copy Clinic Procedure Selection List (3) option on the Manage Procedure Selection List option.

Menu Path: Any Main Menu → ADM (Ambulatory Data Module Main Menu) → 4 (Ambulatory Data Collection Manager Menu) → 3 (Manage Procedure Selection List) → 3 (Copy Clinic Procedure Selection List)

2. List to Copy From:

Type the name of the procedure selection list (e.g., Trauma), or type ?? to display the existing procedure selection lists.

3. List to Copy To:

Type a new title for the destination procedure selection list, or type ?? to display the existing procedure selection lists. The name must be 3 to 30 characters long (e.g., Trauma).

- 4. Are You Adding 'List Name' as a New Procedure Selection List? Y
- 5 Clinic:

Type the first four letters of the clinic. A numbered clinic picklist displays. Type the clinic number.

A response displays: List will be copied to new list

6. Do You Wish To Continue?

Type **Y** to continue, or press **Enter**> to accept the NO default. You return to the Manage Procedure Selection List.

7. Press **Enter>** to return to the Ambulatory Data Collection Manager Menu.

# 9.4. Delete Clinic Procedure Selection List (4) Option

The Delete Clinic Procedure Selection List (4) option on the Manage Procedure Selection List screen allows the ADM administrator/supervisor to delete a clinic procedure selection list.

1. Access the Delete Clinic Procedure Selection List (4) option on the Manage Procedure Selection List screen.

**Menu Path:** Any Main Menu  $\rightarrow$  ADM (Ambulatory Data Module Main Menu)  $\rightarrow$  4 (Ambulatory Data Collection Manager Menu)  $\rightarrow$  3 (Manage Procedure Selection List)  $\rightarrow$  4 (Delete Clinic Procedure Selection List)

2. Select Clinic Procedure Selection List:

Type the name of the procedure selection list to be deleted.

3. Are You Sure You Want to Delete 'List Name'?

Type  $\mathbf{Y}$  to delete the entire list, or type  $\mathbf{N}$  to abort the option and return to the Manage Procedure Selection List screen.

# 10. Manage Evaluation & Management Codes (1) Option

The Manage Evaluation & Management Codes (1) option on the Ambulatory Data Collection Manager Menu contains options that allow an ADM administrator/supervisor to create, print, copy, or delete lists of Evaluation & Management (E&M) codes.

The E&M code reference lists differ from the diagnosis and procedure selection lists in the following ways:

- Only one E&M code list can be entered for each clinic. (The list/multiple category arrangement is not available.)
- The E&M code number automatically sorts the E&M codes.

Access the Manage Evaluation & Management Codes option on the Ambulatory Data Collection Manager Menu.

**Menu Path:** Any Main Menu  $\rightarrow$  ADM (Ambulatory Data Module Main Menu)  $\rightarrow$  4 (Ambulatory Data Collection Manager Menu)  $\rightarrow$  1 (Manage Evaluation & Management Codes)

The Manage Evaluation & Management Codes screen displays (Figure 10-1).

Load All Evaluation & Management Codes

Define Clinic Evaluation & Management Codes

Print Clinic Evaluation & Management Codes

Copy Clinic Evaluation & Management Codes

Delete Clinic Evaluation & Management Codes

Select Manage Evaluation & Management Codes Option:

Figure 10-1. Manage Evaluation & Management Codes Screen

# 10.1. Load All Evaluation & Management Codes (1) Option

The Load All Evaluation & Management Codes (1) option must be used after each annual revision of the CHCS DoD CPT Code Tables. Check with the CHCS systems personnel to confirm that the update has been loaded into CHCS before performing this procedure.

**Menu Path:** Any Main Menu  $\rightarrow$  ADM (Ambulatory Data Module Main Menu)  $\rightarrow$  4 (Ambulatory Data Collection Manager Menu)  $\rightarrow$  1 (Manage Evaluation & Management Codes)  $\rightarrow$  1 (Load All Evaluation & Management Codes)

# 10.2. Define Clinic Evaluation & Management Codes (2) Option

1. Access the Define Clinic Evaluation & Management Codes (2) option on the Manage Evaluation & Management Codes screen.

**Menu Path:** Any Main Menu  $\rightarrow$  ADM (Ambulatory Data Module Main Menu)  $\rightarrow$  4 (Ambulatory Data Collection Manager Menu)  $\rightarrow$  1 (Manage Evaluation & Management Codes)  $\rightarrow$  2 (Define Clinic Evaluation & Management Codes)

#### 2. Select Location:

Type the first four letters of the clinic (e.g., CARD for the Cardiology clinic) or MEPRS code (e.g., BGAA). A numbered clinic picklist may display. Type the clinic number.

3. Enter Evaluation/Management Code:

Use one of the following methods to enter an E&M code:

a. Type the five-digit E&M code number.

The code and description populate the field.

- b. If you know the system description of the code number, type the first few characters of the description. Then type the E&M code reference number.
- c. Type ?? to display an E&M code picklist. Press **<Enter>** to scroll through the list. Type ^ to discontinue scrolling through the list and type the five-digit E&M code number.

**Note:** This is a Read-Only list. Since you cannot select a code, note the code number.

4. Display Text:

Type a customized code description. The description can be up to 45 characters long. If you do not enter a customized description, the system uses the default description.

5. Press **Enter**> to return to the Manage Evaluation & Management Codes screen.

## 10.3. Print Clinic Evaluation & Management Codes (3) Option

The Print Clinic Evaluation & Management Codes (3) option on the Manage Evaluation & Management Codes screen allows the ADM administrator/supervisor to view or print a predefined clinic E&M selection list. The option requires a clinic name or MEPRS code, the standard CHCS device, and the right margin.

1. Access the Print Clinic Evaluation & Management Codes (3) option on the Manage Evaluation & Management Codes screen.

**Menu Path:** Any Main Menu  $\rightarrow$  ADM (Ambulatory Data Module Main Menu)  $\rightarrow$  4 (Ambulatory Data Collection Manager Menu)  $\rightarrow$  1 (Manage Evaluation & Management Codes)  $\rightarrow$  3 (Print Clinic Evaluation & Management Codes)

## 2. Select Clinic:

Type the first four letters of the clinic name or the MEPRS code. A numbered clinic picklist may display. Type the clinic number.

3. Device:

Press **Enter**> twice to display the Clinic Selection Lists screen, or type the name of the device, or type ? to display a device picklist.

The clinic codes display with their customized and original descriptions.

4. Press **Enter>** to return to the Manage Evaluation & Management Codes screen.

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## 10.4. Copy Clinic Evaluation & Management Codes (4) Option

The Copy Clinic Evaluation & Management Selection List (4) option on the Manage Evaluation & Management Codes screen allows the ADM administrator/supervisor to duplicate a clinic E&M selection list from one clinic to another.

1. Access the Copy Clinic Evaluation & Management Codes (4) option on the Manage Evaluation & Management Codes screen.

**Menu Path:** Any Main Menu  $\rightarrow$  ADM (Ambulatory Data Module Main Menu)  $\rightarrow$  4 (Ambulatory Data Collection Manager Menu)  $\rightarrow$  1 (Manage Evaluation & Management Codes)  $\rightarrow$  4 (Copy Clinic Evaluation & Management Selection List)

2. Enter Source Clinic Name:

Type the first four letters of the clinic name or MEPRS code. A numbered clinic picklist may display. Type the clinic number.

3. Enter Target Clinic Name:

Type the first four letters of the clinic name or the MEPRS code. A numbered clinic picklist may display. Type the clinic number.

The message displays: ... Transfer Complete

4. Press **Enter>** to return to the Manage Evaluation & Management Codes screen.

## 10.5. Delete Clinic Evaluation & Management Codes (5) Option

1. Access the Delete Clinic Evaluation & Management Codes (5) option on the Manage Evaluation & Management Codes screen.

**Menu Path:** Any Main Menu  $\rightarrow$  ADM (Ambulatory Data Module Main Menu)  $\rightarrow$  4 (Ambulatory Data Collection Manager Menu)  $\rightarrow$  1 (Manage Evaluation & Management Codes)  $\rightarrow$  5 (Delete Clinic Evaluation & Management Codes)

2. Code to delete:

Type ?? to display an E&M code picklist.

3. Type the five-digit code number to be deleted.

To delete an E&M code, you must know the five-digit code number and the clinic to which it is assigned. The system searches E&M code lists for all clinics.

4. Select the Clinic from which to delete code 99234:

Enter the clinic from which to delete the E&M code using one of the following methods:

- a. Type the first four letters of the clinic. A numbered clinic picklist may display. Type the clinic number.
- b. Type ?? to display a picklist of clinics with the selected E&M code.
- c. Type N to decline help, then type the clinic name.

**Note:** If you select a clinic that does not already have the E&M code assigned, you may add one.

- 5. Are you sure you want to delete code 99384 from APRIL CLINIC? No//  ${\bf Y}$
- 6. Press **<Enter>** to return to the Manage Evaluation & Management Codes screen.

# 11. Manage For Clinic Use Only Parameters (7) Option

The Manage For Clinic Use Only Parameters (7) option on the Ambulatory Data Collection Manager Menu allows an ADM administrator/supervisor or the clinic manager to create or print those description(s) that the individual clinic tracks on a local level. The clinic may not have more that six available descriptions at any given time, and each description may not have more than five levels (e.g., A through E).

1. Access the Manage For Clinic Use Only Parameters (7) option on the Manage Evaluation & Management Codes screen.

**Menu Path:** Any Main Menu  $\rightarrow$  ADM (Ambulatory Data Module Main Menu)  $\rightarrow$  4 (Ambulatory Data Collection Manager Menu)  $\rightarrow$  7 (Manage For Clinic Use Only Parameters)

#### 2. Select Location:

Enter the clinic. The ADM for Clinic Use Only screen displays (Figure 11-1). It shows clinics that have existing For Clinic Use Only (FCUO) descriptions and an action bar (described in Table 11-1.

ADM for Clinic Use Only			
BACA CARDIOLOGY CLINIC			
>> No for Clinic Use Only Items to display <<			
Add aVailability Expand Print aBout eXit Add FCUO Item if nothing is selected or Level if an Item is selected			

Figure 11-1. ADM for Clinic Use Only Screen
Table 11-1. ADM for Clinic Use Only Action Bar

Action	Description
Add	Add FCUO item if nothing is selected or add a level if an item is selected.
aVailability	Toggle the selected items or levels available/unavailable.
Expand	Show or hide levels for all items. Press <b><f9></f9></b> to expand only selected items.
Print	Print based on items and levels currently displayed.
aBout	Display information about the FCUO codes.
Exit	Exit the option and return to the Ambulatory Data Collection Manager Menu.

## 11.1. Add or Change For Clinic Use Only Items/Levels (Add) Action

- 1. Type **A** or use the right- and left- arrow keys to select the Add action.
- 2. Enter the new FCUO Item Description:

Type an FCUO description of up to 30 characters. The ADM For Clinic Use Only - New Item screen displays (Figure 11-2).

```
ADM For Clinic Use Only - New Item

DJBA APRIL CLINIC

Item Description: Rate your health
Display Order #: 1
Availability Status: AVAILABLE

Available Levels:
A.
B.
C.
D.
E.

Help = HELP   Exit = F10   File/Exit = D0
```

Figure 11-2. ADM For Clinic Use Only - New Item Screen

#### 3. Item Description:

The description displays in the Item Description field. Modify the name using standard CHCS keys to edit the name or press **Enter**> to accept the description.

#### 4. Display Order #:

Define the display order (if desired). The clinic is limited to six available items at any given time. Type a number from 1 to 6, as applicable, or press **Enter**> to accept the default of 1 for the first clinic entry.

## 5. Availability Status: AVAILABLE

Press **Enter** to accept the AVAILABLE default or type **U** to change the status to UNAVAILABLE. If the status is changed to unavailable, the item and all associated levels will NOT be available when entering encounter information.

#### 6. Available Levels:

This field allows the clinic to enter the levels to associate to the description (e.g., Outstanding, Excellent, Good, etc.).

- a. Change the availability of an existing FCUO description/level by repeating step 1.
- b. Use the up- and down-arrow keys to scroll through the FCUO description/level picklist.

c. Press **<Select>** (or **<End>**) to select the FCUO description/level for which to change the status

- d. Type **V** or use the left- and right-arrow keys to highlight the aVailability action to toggle the availability status.
  - The availability status changes to the desired status and the item moves to the appropriate section.
- e. Press **X** to exit the ADM For Clinic Use Only option and return to the Ambulatory Data Collection Manager Menu.
- 7. After all required levels have been defined, press **Enter**> to display the action bar.
- 8. Select the File/Exit action to file the changes and exit the action.
- 9. Are you sure you want to keep this new item?

Press **<Enter>** to confirm the addition or change.

#### **Business Rule:**

Once the entry has been saved, the status can be changed to either be available or unavailable, but the entry cannot be deleted. This feature allows for a historical archive of FCUO descriptions.

Unavailable items/levels do not display on the reference lists accessed by providers during completion of patient encounters.

# 11.2. Expand the For Clinic Use Only Items/Levels (Expand) Action

Use the Expand action to show or hide levels for all items or selected items.

Type **E** or use the left- and right-arrow keys to highlight the Expand action to expand the display of all items.

To expand only the selected items, use the up- and down-arrow keys to scroll through the available list and press **Select>** (or **End>**) and press **F9>**.

# 11.3. Print the For Clinic Use Only Items/Levels (Print) Action

- 1. Type **P** or use the left- and right-arrow keys to highlight the Print action.
- 2. Press **Enter**> to accept the NO default to print only the available items and levels, or type **Y** to also include the unavailable items and levels.
- 3. Device:

Type the name of the print device, or type ? to display a device picklist.

You return to ADM For Clinic Use Only screen.

# 12. Encounter Form Designer (5) Option – ADM Main Menu

The Encounter Form Designer (5) option on the ADM Main Menu allows an ADM administrator/supervisor to define the clinic default responses and more commonly used diagnosis codes, E&M codes, and procedure codes to be entered onto an encounter form. This option is provided as a contingency feature to print an ADM encounter form in the event that CHCS is scheduled to be unavailable during the clinic business hours. This option is not intended nor designed for long-term use, but rather as an ADM data collection mechanism during CHCS unavailability.

Only one encounter form per clinic can be created and associated with the clinic.

Access the Encounter Form Designer (5) option on the ADM Main Menu.

**Menu Path:** Any Main Menu  $\rightarrow$  ADM (Ambulatory Data Module Main Menu)  $\rightarrow$  5 (Encounter Form Designer)

**Security Key:** KG ADS MANAGEMENT

The Encounter Form Designer screen displays (Figure 12-1).

Encounter Form Designer			
MEPRS	Clinic Location Encounter Form Design		
BGAA	FAMILY PRACTICE CLINIC Adult		
Add <b>E</b> di	it <b>D</b> elete <b>R</b> ename <b>P</b> rint a <b>B</b> out e <b>X</b> it		

Figure 12-1. Encounter Form Designer Screen

The Encounter Form Designer action bar (described in Table 12-1) allows you to add, edit, delete, rename, print, display information about the Encounter Form Designer functionality, and exit the Encounter Form Designer screen.

**Table 12-1.** Encounter Form Designer Action Bar

Action	Description
Add	Add a new ADM Encounter Form Design.
Edit	Modify a previously entered ADM Encounter Form Design.
Delete	Delete an ADM Encounter Form Design.
Rename	Rename an ADM Encounter Form
Print	Print an ADM Encounter Form
About	Displays information about the ADM Encounter Form Designer
eXit	Quit the action and return to previous screen.

## 12.1. Add an ADM Encounter Form (Add) Action

1. Type **A** or use the right- and left-arrow keys to highlight the Add action.

The Add ADM Encounter Form screen displays (Figure 12-2).

```
>>> Add Encounter Form <<<
[------]
Creating Encounter Form
Select CLINIC:
[-----]
```

Figure 12-2. Add ADM Encounter Form Screen

#### 2. Select CLINIC:

Enter the clinic using one of three methods:

- a. Type the first four letters of the clinic name (e.g., CARD for the Cardiology clinic). Any clinic name beginning with the first four letters displays.
  - 1) Use the up- and down-arrow keys to scroll through the list and position the cursor.
  - 2) Press **Select**> (or **End**>) to select the correct clinic.
- b. Type all or part of the MEPRS code (e.g., BACA for the Cardiology clinic).
  - 1) Use the up- and down-arrow keys to scroll through the list and position the cursor.
  - 2) Press **Select** (or **End**) to select the correct clinic MEPRS code.
- 3. Enter Encounter Form Name:

Type the encounter form name.

4. Verify To Add adult (Y/N) N// Y

Type **Y** to display the Encounter Form screen (Figure 12-3), or press **Enter** accept the NO default and return to the Clinic Encounter Form Designer screen.

Encounter Form: FORM NAME MEPR: BAKA

Display Patient Demographics : NO

Evaluation & Management Codes
99201 OPV, NEW; PROB FOC HX & EXAM, STFWD DEC, 10 MIN
99202 OPV, NEW; EXP PROB FOC HX & EXAM, STFWD DEC, 20 MIN

Diagnosis Select:
285.9 ANEMIA NOS

Procedures Select:
11100 BIOPSY OF SKIN LESION
15852 DRESSING CHANGE, NOT FOR BURN

Help = HELP Exit = F10 File/Exit = DO INSERT OFF

Figure 12-3. Encounter Form Screen

#### 5. Display Patient Demographics:

Type **YES** to print the patient demographics data on the encounter form. Or type **NO** to print the encounter forms without specific patient demographic data.

## 6. Evaluation & Management Codes

These codes document the level of care and the complexity of the visit. Refer to Section 10.2 for the process steps to enter the E&M codes. Type ?? to display the E&M code picklist.

Note: A maximum of 15 E&M codes can be printed on the printable encounter form.

## 7. Diagnosis Select:

Identify a predefined clinic selection list that will be referenced in conjunction with the ICD-9 code file and the CPT/HCPCS file codes when creating the printable encounter form. Only one clinic selection list may be referenced for creating the encounter form. The clinic selection lists are available in this functionality from which to select some of the frequently used codes to add to the form.

Type? to display the picklist of available codes.

Refer to Section 8.1.2.2 for the process steps for entering Diagnosis codes.

Short descriptions of the diagnosis codes display on the screen after you select of the code. Descriptions for the diagnosis codes on picklists do not display clinic custom descriptions.

#### **Business Rule:**

The program checks to ensure Inactive codes cannot be entered, and if the current defaults contain codes that has subsequently become Inactive they will be flagged. A maximum of 40 diagnosis codes can be printed on the printable encounter form.

#### 8. Procedures Select:

Refer to Section 9.1.2.2 for process steps of entering the Procedure codes.

Short descriptions of the procedure codes display after you select the code. The picklists do not display clinic custom descriptions for the procedure codes.

- 9. Press **<Enter>** twice to display the action bar.
- 10. Select the File/exit action to file the new encounter form and exit the action.

## 12.2. Edit ADM Encounter Form Designer (Edit) Action

The ADM administrator/supervisor can modify (edit) the default clinic responses on an encounter form.

- 1. Type **E** or use the right-and left-arrow keys to highlight the Edit action.
- 2. Use the up- and down-arrow keys to scroll through the clinic picklist.
- 3. Press **Select>** (or **End>**) to select the clinic encounter form to edit.

Refer to Section 10.2 for the process steps to add E&M codes to the encounter form design, Section 8.1.2.2 for diagnosis codes, and Section 9.1.2.2 for procedure codes.

**Note**: Remember that each section of the encounter form has a maximum allowable number of Diagnosis, Procedure, and E&M codes to maintain a complete one-page encounter form with patient demographic fields.

4. When you have completed adding codes, type **X** or use the right- and left-arrow keys to highlight the eXit action.

#### 12.2.1 Delete Codes from the Encounter Form

The ADM administrator/supervisor may add or delete E&M codes, diagnosis codes, or procedure codes from the encounter form. The procedure is the same for each section where codes are deleted

- 1. Type **E** or use the right-and left-arrow keys to highlight the Edit action.
- 2. Use the up- or down-arrow keys or press **Enter>** to position the cursor on the code to be deleted.
- 3. Press **Select** (or **End**) to select the code.
- 4. Press **PF1>-<Backspace** (or **End>**) to delete the code.
- 5. OK to DELETE the entire 99201 Entry?

Type Y to confirm the prompt or type N to abort deleting the code.

- 6. Press**<Enter>** to return to the previous location on the Encounter Form screen.
- 7. Press **Do** or continue to press **Enter** until the Encounter Form is filed to return to the ADM Encounter Form Designer screen.

# 12.3. Delete Encounter Form Design (Delete) Action

The ADM administrator/supervisor can remove a clinic from the clinic picklist defined in the Encounter Form Designer file.

1. Type **D** or use the right-and left-arrow keys to highlight the Delete action.

**Note:** Use caution when deleting an encounter form design. The Delete action deletes the encounter form design entirely. ADM security has been enhanced to allow the user access only to those forms for clinics to which the user has access.

A warning displays Warning: Delete Encounter Form displays.

- 2. Verify To Delete Encounter Form (Y/N):
  - a. Accept the NO default to return to the Clinic Encounter Form Designer screen.
  - Type Y to confirm deletion of the encounter form design
     You return to the Clinic Encounter Form Designer screen and the form is removed from the list.
- 3. Type **X** or use the right- and left-arrow keys to highlight the eXit action.

## 12.4. Rename Encounter Form Design (Rename) Action

The ADM administrator/supervisor can rename a clinic encounter form from the clinic picklist defined in the Encounter Form Designer file.

- 1. Type **R** or use the right-and left-arrow keys to highlight the Rename action.
- 2. Enter New Encounter Form Name:

Enter a new encounter form name.

3. Verify To Rename Encounter Form (Y/N)

Type **Y** to rename the encounter form or accept the NO default to return to the Clinic Encounter Form Designer screen.

4. Press **X** or use the right- and left-arrow keys to highlight the eXit action.

# 12.5. Print Encounter Form Design (Print) Action

The ADM administrator/supervisor can print a clinic encounter form from the clinic picklist defined in the Encounter Form Designer file. If you choose to print patient demographics, only pending appointments print on the encounter form.

- 1. Press **P** or use the right- and left-arrow keys to highlight the Print action.
- 2. Depending on whether patient demographics are included, perform one of the following:
  - a. If the Demographic selection is NO:
    - 1) Type the number of copies to print. The default is one.
    - 2) Device:

Press **Enter**> to display on the screen, or type the name of the print device, or type ? to display a print device picklist.

- b. If the Demographic selection is YES:
  - 1) Start with Appointment Date:

Press **Enter** to accept the default, or enter a new date in CHCS date format.

## 2) Through Date:

When entering the Start and Through Dates, the end date must be a date further ahead of the start date (e.g., Start date: 20 Jul 2000, End date: 25 Jul 2000).

#### 3. Select Provider:

Enter the provider's name in one of the following manners:

- a. Type the first four letters of the provider's name and press **Enter**>

  If the provider is not assigned to the selected clinic, two question marks display after the provider's name (Baker ??).
- b. If a provider picklist displays, enter the number.
- c. Type the provider's last name. Press **Enter**> to confirm the provider if the provider's name displays with OK?
- d. Type the last four digits of the provider's Social Security number (SSN). Press **Enter**> to confirm the provider if the provider's name displays with OK?

#### 4. Select Device

Press **Enter**> at the to display the Clinic Encounter Form on the screen, or type the name of the print device, or type ? to display a print device picklist.

Refer to Figure 12-4 and Figure 12-5 for a sample encounter form without patient demographics selected.

FORM: Adult MEPRS: BGAA CLIN	IC: FAMILY PRACTICE CLINIC DATE: TIME:
Patient :	FMP/SSN: DOB: Home Phone: ()
Pri. Provider:	Work Phone: ()
Add Provider1:	Role: Attending Assisting Supervisor Nurse Para-Professional
Add Provider2:	Role: Attending Assisting Supervisor Nurse Para-Professional
Insurance Co.:	Ins. Phone: Group Number:
Policy Number:	Pat Rel: Group Name :
>>> DIAGNOSIS CODES DIAGNOSIS CODES <<<	
789.00 ABDOMINAL PAIN, UNSPECIFIED 1 2 3 4 U	786.7 ABNORMAL CHEST SOUNDS 1 2 3 4 U
535.00 ACUTE GASTRITIS, WITHOUT MEN 1 2 3 4 U	462 ACUTE PHARYNGITIS 1 2 3 4 U
461.9 ACUTE SINUSITIS, UNSPECIFIED 1 2 3 4 U	463 ACUTE TONSILLITIS 1 2 3 4 U
465.9 ACUTE UPPER RESPIRATORY INFE 1 2 3 4 U	385.11 ADHESIONS OF DRUM HEAD TO IN 1 2 3 4 U
285.9 ANEMIA, UNSPECIFIED 1 2 3 4 U	444.21 ARTERIAL EMBOLISM AND THROMB 1 2 3 4 U
713.4 ARTHROPATHY ASSOCIATED WITH 1 2 3 4 U	493.90 ASTHMA, UNSPECIFIED TYPE, ST 1 2 3 4 U
V58.3 ATTENTION TO SURGICAL DRESSI 1 2 3 4 U	350.2 ATYPICAL FACE PAIN 1 2 3 4 U
724.5 BACKACHE, UNSPECIFIED 1 2 3 4 U	490 BRONCHITIS, NOT SPECIFIED AS 1 2 3 4 U
942.02 BURN, UNSPECIFIED DEGREE, CH 1 2 3 4 U	949.0 BURN, UNSPECIFIED DEGREE, UN 1 2 3 4 U
682.9 CELLULITIS AND ABSCESS OF UN 1 2 3 4 U	414.9 CHRONIC ISCHEMIC HEART DISEA 1 2 3 4 U
472.0 CHRONIC RHINITIS 1 2 3 4 U	473.9 CHRONIC SINUSITIS, UNSPECIFI 1 2 3 4 U
346.10 COMMON MIGRAINE WO MENTION O 1 2 3 4 U	692.9 CONTACT DERMATITIS AND OTHER 1 2 3 4 U
786.2 COUGH 1 2 3 4 U	110.2 DERMATOPHYTOSIS OF HAND 1 2 3 4 U
250.00 DIABETES MELLITUS WITHOUT ME 1 2 3 4 U	250.20 DIABETES WITH HYPEROSMOLARIT 1 2 3 4 U
796.2 ELEVATED BLOOD PRESSURE READ 1 2 3 4 U	530.10 ESOPHAGITIS, UNSPECIFIED 1 2 3 4 U
401.9 ESSENTIAL HYPERTENSION, NOS 1 2 3 4 U	780.6 FEVER 1 2 3 4 U
807.4 FLAIL CHEST 1 2 3 4 U	558.9 GASTROENTERITIS AND COLITIS, 1 2 3 4 U
V72.3 GYNECOLOGICAL EXAMINATION 1 2 3 4 U	784.0 HEADACHE 1 2 3 4 U
757.0 HEREDITARY EDEMA OF LEGS 1 2 3 4 U	201.60 HODGKIN'S DIS, MIXED CELLULA 1 2 3 4 U
201.44 HODGKIN'S DISEASE, LYMPHO-HI 1 2 3 4 U	201.17 HODGKIN'S GRANULOMA, SPLEEN 1 2 3 4 U

Figure 12-4. Sample Encounter Form Without Patient Demographics Selected - 1

1	
>>> PROCEDURE CODES PROCEDURE CO	DES <<<
94640 AIRWAY INHALATION TREATMEN	1 2 3 4 11100 BIOPSY OF SKIN LESION 1 2 3 4 58100 BIOPSY OF UTERUS LINING 1 2 3 4
56605 BIOPSY OF VULVA/PERINEUM	1 2 3 4 82270 BLOOD,OCCULT; FECES,1-3 SIM 1 2 3 4 69200 CLEAR OUTER EAR CANAL 1 2 3 4
17340 CRYOTHERAPY OF SKIN	1 2 3 4 17000 DESTROY BENIGN/PREMAL LESI 1 2 3 4 11740 DRAIN BLOOD FROM UNDER NAI 1 2 3 4
20605 DRAIN/INJECT JOINT/BURSA	1 2 3 4 20610 DRAIN/INJECT JOINT/BURSA 1 2 3 4 10060 DRAINAGE OF SKIN ABSCESS 1 2 3 4
36415 DRAWING BLOOD	1 2 3 4 15852 DRESSING CHANGE, NOT FOR BU 1 2 3 4 93272 ECG/REVIEW, INTERPRET ONLY 1 2 3 4
93000 ELECTROCARDIOGRAM, COMPLET	1 2 3 4 57505 ENDOCERVICAL CURETTAGE 1 2 3 4 20550 INJ TENDON/LIGAMENT/CYST 1 2 3 4
90782 INJECTION (SC)/(IM)	1 2 3 4 90781 IV INFUS THER; ADD HR, TO1 2 3 4 90780 IV INFUSION THERAPY, 1 HOU 1 2 3 4
11750 REMOVAL OF NAIL BED	1 2 3 4 11730 REMOVAL OF NAIL PLATE 1 2 3 4 11441 REMOVAL OF SKIN LESION 1 2 3 4
11200 REMOVAL OF SKIN TAGS	1 2 3 4 55250 REMOVAL OF SPERM DUCT(S) 1 2 3 4 10120 REMOVE FOREIGN BODY 1 2 3 4
65205 REMOVE FOREIGN BODY FROM E	1 2 3 4 69210 REMOVE IMPACTED EAR WAX 1 2 3 4 30300 REMOVE NASAL FOREIGN BODY 1 2 3 4
>>> EVALUATION & MANAGEMENT CODES	- EVALUATION & MANAGEMENT CODES <<<
99373 Telephone Consult, Complex	E 99499 ASDSADSA E 99271 CONFIRMATORY CONSULTATION E
99272 CONFIRMATORY CONSULTATION	E 99273 CONFIRMATORY CONSULTATION E 99215 EST PT/COMP/HIGH COMPLEX E
99214 EST PT/DETAIL/MOD	E 99213 EST PT/EXP AND LOW COMP E 99212 EST PT/PROBLEM FOCUSED E
99261 FOLLOW-UP INPATIENT CONSULT	E 99262 FOLLOW-UP INPATIENT CONSULT E 99263 FOLLOW-UP INPATIENT CONSULT E
99297 NEONATAL CRITICAL CARE	E 99371 PHONE CONSULT BRIEF E 99372 PHONE CONSULT/INTERMEDIATE COMPL E
DISPOSITION (UNLESS INPATIENT)	ADMINISTRATIVE (OPTIONAL) APPOINTMENT STATUS FOR CLINIC USE ONLY
Released Without Limitations	Consultation Requested Appointment Schedule A B C D E
Released W Work/Duty Limitations	Referred To Another Provider Walk-In A B C D E
Sick At Home/Quarters	Convalescent Leave Sick-Call A B C D E
Immediate Referral	Medical Board Telephone Consult A B C D E
Left Without Being Seen	Medical Hold No-Show A B C D E
Left Against Medical Advice	Cancelled By Patient A B C D E
Admitted	APV YES No Cancelled By Facility
Expired	INPATIENT YES NO

Figure 12-5. Sample Encounter Form Without Patient Demographics Selected - 2

# 13. ADM Interface Error Menu (6) Option

This section addresses how to view and process ADM-generated errors as records are selected for transmission from ADM to the SADR and TPOCS extracts. Table 13-1 describes the status of these errors.

**Table 13-1. ADM Interface Error Report Statuses** 

Status	Description		
Error	Records did not transmit to the ADM database		
Warning	Records were transmitted to the database but have demographic data discrepancies.		
Unresolvable	The system administrator has deliberately placed records in holding status.		

Prior to saving a record, ADM checks to ensure that the record meets the Business Rules and prompts the user to correct any identified discrepancy. During an overnight process, ADM submits completed records for transmission in the SADR and TPOCS extracts. If errors are identified by ADM, the record is rejected. Clinic managers should review the interface error reports on a regular basis to guarantee that records originating in ADM are truly being included in the SADR and TPOCS extracts. If errors are unresolved, they continue to be reported. Once the data is obtained that can correct the record, the clinic manager can change the record status from Unresolvable to Error so that the record is retransmitted in the overnight process.

Access the ADM Interface Error Menu (6) option on the Ambulatory Data Collection Manager screen.

**Menu Path:** Any Main Menu  $\rightarrow$  ADM (Ambulatory Data Module Main Menu)  $\rightarrow$  4 (Ambulatory Data Collection Manager)  $\rightarrow$  6 (ADM Interface Error Menu)

**Security Key:** KG ADS MANAGEMENT

KG ADS INTERFACE ERRORS

## **13.1.** ADM Interface Error Processing (1) Option

The ADM Interface Error Processing (1) option on the ADM Interface Error Menu consists of utilities to change the status of errors (described in Table 13-1). Changing the record status from Error to Pending is a manual means of submitting records to be retransmitted to the SADR and TPOCS extracts after the record has been corrected. Changing the record status from Unresolvable to Error allows the ADM administrator/supervisor to reclassify the unresolvable errors.

1. Access the ADM Interface Error Processing (1) option on the ADM Interface Error Menu.

**Menu Path:** Any Main Menu  $\rightarrow$  ADM (Ambulatory Data Module Main Menu)  $\rightarrow$  4 (Ambulatory Data Collection Manager)  $\rightarrow$  6 (ADM Interface Error Menu)  $\rightarrow$  1 (ADM Interface Error Processing)

Type 1 or use the up- and down-arrow keys to highlight the selection.

The ADM Error Processing Menu displays (Figure 13-1).

```
ADM Error Processing Menu
Change Status of Selected Record(s)

1. Error to Pending (Queue to Retransmit)
2. Unresolvable to Error (Return to Reports)
Enter Selection=> X. Exit
```

Figure 13-1. ADM Error Processing Menu

- 2. Select the records (by clinic and date) to apply the action.
  - a. To change the record status from Error to Pending, type **1** (**do not** press **<Enter>**) to select the Error to Pending (Queue to Retransmit) option. This is a manual means of submitting records to be retransmitted to the ADM database after the record has been corrected.
  - b. To change the record status from Error to Unresolvable, type **2** (**do not** press **<Enter>**) to select the Error to Unresolvable (Remove from Reports) option. This option prevents a record from being submitted for retransmission. This option is used for records that would take an extended amount of time to correct.
  - c. To change the record status from Unresolvable to Error, type **2** (**do not** press **<Enter>**) to select the Unresolvable to Error (Return to Reports) option. This option allows the ADM administrator/supervisor to view unresolved errors based on clinic location and date range and to reclassify the unresolvable errors.
- 3. Select Clinic (default ALL, ^ to exit):

Press **<Enter>** to select all clinics.

Or type the first four letters of the clinic (e.g., CARD for the Cardiology clinic) or MEPRS code (e.g., BGAA). A numbered clinic picklist displays. Type the clinic number.

4. Beginning with Appointment Date:

Press **<Enter>** to accept the default, or enter a new date.

5. End with Appointment Date:

Press **Enter>** to accept the default, or enter a new date. The Requeue Records to ADM screen displays (Figure 13-2).

Figure 13-2. Requeue Records to ADM Screen

- 6. Select and process the records.
  - a. Use the up- and down-arrow keys to highlight the record.
  - b. Press **<Select>** (or **<End>**) to choose the record(s) to process.
  - c. Press **<Enter>**to process the record(s) or press ^ to cancel.
- 7. Press **Enter**> to return to the ADM Error Processing Menu.
- 8. Type **X** to return to the ADM Interface Error Menu.

## 13.2. ADM Interface Error Report (2) Option

The ADM Interface Error Report (2) option on the ADM Interface Error Menu generates a summary of transmission errors and warnings resulting from the transmission of data from ADM to the SADR and TPOCS extracts.

Access the ADM Interface Error Report (2) option on the ADM Interface Error Menu.

**Menu Path:** Any Main Menu  $\rightarrow$  ADM (Ambulatory Data Module Main Menu)  $\rightarrow$  4 (Ambulatory Data Collection Manager)  $\rightarrow$  6 (ADM Interface Error Menu)  $\rightarrow$  2 (ADM Interface Error Report)

## 13.2.1 Generate Report Based on Clinic

1. Generate Report Based on [M]EPRS or [C]linic (M/C)?

Type **C** or press **<Enter>** to generate an error report based on clinics.

2. Select CLINIC (default ALL, ^ to exit):

Press **Enter>** to accept the All default or enter the specific clinic(s) for the report.

3. Beginning with Appointment Date:

Press **<Enter>** to accept the default date, or enter a new date.

4. End with Appointment Date:

Press **Enter**> to accept the default date, or enter a new date.

5. Enter Status(s):

Specify the interface status for the record. Refer to Table 13-2.

Table 13-2. Interface Status Filtering

Status	Filtering
Error	Enter ERROR: [A]ll or [S]elected (A/S)?
	Press <b>Enter</b> > to accept the All Errors default, or enter a specific error for the report.
Warning	Enter WARNING: [A]ll or [S]elected (A/S)?
	Press <b>Enter</b> > to accept the default of All Warnings, or enter a specific warning for the report.
Unresolvable	None.

6. This may be a COMPLEX Report. Please queue it to print during the night or other non-peak hours. Printing it NOW may impact other users on the system. Do you want to proceed with this report?

Type **Y** to continue processing.

7. Device:

Press **Enter>** to display the report on the screen, or type the name of the print device, or type **?** to display a print device picklist.

## 13.2.2 Generate Report Based on MEPRS Code

1. Generate Report Based on [M]EPRS or [C]linic (M/C)?

Type **M** to generate a compliance report based on MEPRS code.

2. Select MEPRS (default ALL, ^ to exit):

Press **Enter**> to accept the default of All MEPRS codes, or enter the specific MEPRS code(s) for the report.

3. Beginning with Appointment Date:

Press **<Enter>** to accept the default date, or enter a new date.

4. End with Appointment Date:

Press **<Enter>** to accept the default date, or enter a new date.

5. Enter Status(s):

Specify the interface status for the record. Refer to Table 13-2.

6. This may be a COMPLEX Report. Please queue it to print during the night or other non-peak hours. Printing it NOW may impact other users on the system. Do you want to proceed with this report?

Type **Y** to continue processing the report.

7. Device:

Press **Enter>** to display the report on the screen, or type the name of the print device, or type **?** to display a print device picklist.

Figure 13-3 shows a sample ADM Interface Error/Warning Report with the error number and a brief error description displayed for each appointment.

```
ADM INTERFACE ERROR/WARNING REPORT 18 Jun 1999@1612
     Appt Dates: 17 Jun 1998 to 18 Jun 1999@1612
For: FAMILY PRACTICE CLINIC
                                         PROVIDER
CLINIC PATIENT APPT DATE/TIME
_____
FAMILY PRACTICE CLIN REAGAN, PAUL 18 Dec 2000@1009 DOCTOR, AARON
 ERR: 218 ICD9 Level missing or invalid.
FAMILY PRACTICE CLIN BEAN, DWIGHT L
                                    13 Dec 2000@1549 DOCTOR,BAKER
 ERR: 218 ICD9 Level missing or invalid.
FAMILY PRACTICE CLIN AANERUD, ROY 09 Apr 2001@1600 DOCTOR, DAVIS
 ERR: 222 Disposition missing based on status.
FAMILY PRACTICE CLIN JORDAN, ALISON R 10 May 2001@1330 DOCTOR, EADY
 ERR: 222 Disposition missing based on status.
FAMILY PRACTICE CLIN JORDAN, AMANDA N 10 May 2001@1230 DOCTOR, IACO
 WARN: 402 Primary Policy IEN Missing or invalid.
FAMILY PRACTICE CLIN SCHMID, TRUDY E 23 May 1997@1510 DOCTOR, CABO
 WARN: 411 Insured SSN missing or invalid.
```

Figure 13-3. ADM Interface Error/Warning Report

8. Resolve whatever errors are found.

The records retransmit automatically.

9. Press **<F10>** to return to the ADM Interface Error Menu.

## 13.3. ADM Interface Status Display (3) Option

Use the ADM Interface Status Display (3) option on the ADM Interface Error Menu to display last run information.

1. Access the ADM Interface Error Report (3) option on the ADM Interface Error Menu.

**Menu Path:** Any Main Menu  $\rightarrow$  ADM (Ambulatory Data Module Main Menu)  $\rightarrow$  4 (Ambulatory Data Collection Manager)  $\rightarrow$  6 (ADM Interface Error Menu)  $\rightarrow$  3 (ADM Interface Status Display)

The ADM SADR Extract Status Display screen displays (Figure 13-4).

ADM SADR Extract Status Display	
DIV: AIR FORCE OUTPATIENT DIV DMIS ID: 7056 SADR STATUS: 0/0 records sent. 2@21:30:00 TPOCS STATUS: MSA=0 TPOCS=0 NON-BILLABLE=0 2@23:00:00	LAST RUN: 17 Jul 200 LAST RUN: 17 Jul 200
DIV: NAVY INPATIENT DIVISION DMIS ID: 0124 SADR STATUS: 0/0 records sent. 2@21:30:00 TPOCS STATUS: MSA=0 TPOCS=0 NON-BILLABLE=0 2@23:00:00	LAST RUN: 17 Jul 200 LAST RUN: 17 Jul 200
DIV: NAVY OUTPATIENT DIVISION DMIS ID: 0508 SADR STATUS: 2/2 records sent. 2@13:13:00 TPOCS STATUS: MSA=0 TPOCS=0 NON-BILLABLE=0 2@23:00:00	LAST RUN: 18 Jul 200 LAST RUN: 17 Jul 200
DIV: DDSA DMIS ID: 0380 SADR STATUS: 0/0 records sent. 2@21:30:00	LAST RUN: 17 Jul 200

Figure 13-4. ADM SADR Extract Status Display Screen

The screen displays the following information for each division transmitting data extracts for SADR and TPOCS:

- Division Name
- Division Defense Medical Information System Identification (DMIS ID)
- Number of SADR records created versus number of records extracted for the extract run
- Last Extract Run Date and Time
- TPOCS number of records extracted for each MSA, TPOCS and Non-Billable.
- 2. Press **Enter** to return to the ADM Interface Error Menu.

# 14. ADM SADR Extract Recovery (8) Option

The ADM SADR Extract Recovery (8) option on the Ambulatory Data Collection Manager Menu allows the ADM administrator/supervisor to manually generate extracts based on previously completed and transmitted ADM records due to unexpected system errors and records that were previously transmitted to the Ambulatory Data Systems (ADS) through the Ambulatory Data System Interface (ADSI). This option retransmits previously transmitted records that are not in error status. It also does not replace the requirements to schedule SADR extract through TaskMan and SY ETU.

1. Access the ADM SADR Extract Recovery (8) option on the Ambulatory Data Collection Manager Menu.

**Menu Path:** Any Main Menu  $\rightarrow$  ADM (Ambulatory Data Module Main Menu)  $\rightarrow$  4 (Ambulatory Data Collection Manager Menu)  $\rightarrow$  8 (ADM SADR Extract Recovery)

**Security Keys:** KG ADS MANAGEMENT

KG ADS EXTRACT KG IMM SYSTEMS

**Note:** Limit the KG IMM SYSTEMS security key to one or two site personnel due to the central processing unit (CPU) and task resource restrictions on the system and all recipient systems.

The Recovery of SADR Extract Data screen displays (Figure 14-1).

#### **Business Rule:**

The date range for the extract is limited to 31 days. Do NOT process this option more than once daily due to the potential strain on CHCS.

Recovery of SADR Extract Data

This option re-extracts completed appointment data for download to a VMS flat file for the selected date range. A SADR file will be created for the current division.

Start Date: 01 Jun 2002//

Figure 14-1. Recovery of SADR Extract Data Screen

2. Start Date:

Enter the desired Start Date in acceptable CHCS date format.

3. End Date:

Enter the End Date equal to or less than 31 days in acceptable CHCS date format.

4. Encounter information from 01 Jun 2002 to 30 Jun 2002 will be downloaded Do you wish to continue? YES//

Press **Enter**> to accept the default of YES to process the extract request for the date range requested, or type **N** to abort the extract request and return to the previous menu.

The extract must be manually transmitted before the nightly SADR process creates the next data extract and transmits at the scheduled time. Ask CHCS systems personnel to help you generate a manual transmission. Organizations receiving the files with the regular, scheduled process may reject the SADR files as a duplicate file.

**WARNING:** Be sure to contact these recipient organizations to prevent the data from being overwritten or lost.

# 15. Ambulatory Data Reports (2) Option – ADM Main Menu

The Ambulatory Data Reports (2) option on the ADM Main Menu allows an ADM administrator/supervisor or data quality manager to obtain a variety of reports about each clinic, provider, patient, diagnosis, and procedure within a specified time frame. Ambulatory Data Reports display clinical data for only those clinics that are defined in the ADM Site Parameter file through the Edit ADM Interface Clinics (6) option on the ADM Main Menu.

All ADM reports have been standardized as follows:

- The consistent, user-friendly user interface supports user preferences for the style of the prompts. The FileMan-style prompt is the default. This section assumes that the FileMan-style prompt is active.
- A warning message displays when the date search criteria are being entered for all patient data reports if the start date for the report is before the last system archive (Figure 15-1). This means that all patient data may not be available to report.

Patient Data Archived/Purged.

Patient data has been archived for this report period.

This will result in either inaccurate report data or no data being reported.

# Figure 15-1. Warning Message When the Report Start Date Comes Before the Last System Archive

- All ADM reports use a consistent method to select the output device. By default, the reports
  can output to any available queue device. The exception is Queued Only Reports, which do
  not allow output to the screen or slave devices. To output reports to these devices, users need
  the KG ADS RPT OUTPUT ANYWHERE security key. This key overrides the queue-only
  feature and allows the user to output the report to any device in the foreground or
  background. The TaskMan job number always displays to the user if the queued report was
  successfully tasked.
- Press **<Ctrl>-C** to terminate any ADM report that is running in the foreground. Reports that are output to the screen pause at each page and can be terminated by entering the carat (^) character followed by **<Enter>**at the "Press **<**Return> to continue" prompt
- Data on reports is output in a consistent manner. All headings and subheadings clearly indicate when data continues onto the next page.
- All reports can output a legend page that indicates the search criteria entered for the report. The legend page prints at the end of the report. The report legend option defaults to (B)rief without prompting the user. Specify (E)xpanded to output details about the search criteria entered for a report. To make the prompt available, users need the KG ADS RPT LEGEND OPTION security key. This section assumes you do not have this key, and the prompt sequences do not list the legend option prompt.
- All reports include a NO DATA FOUND banner on the legend page when no data is found based on the search criteria entered.

• All reports have an End Page banner that indicates the successful completion of the report when output to a device other than a terminal.

• Prompts for (O)ne, (M)ultiple, or (A)ll entities are standardized to work consistently. Unless specified otherwise, these prompts work as described in Table 15-1.

Table 15-1. Prompts for (O)ne, (M)ultiple, or (A)ll Entities

Selection	Description		
(O)ne	Select one entity by performing a FileMan lookup, subject to applicable screening.		
(M)ultiple	Select one or more entities by selecting from a picklist, subject to applicable screening.		
	Build a picklist by entering the entity on the last line of the picklist to add to the list. Applicable data validation will be performed (e.g., FileMan lookup or data format verification). Each entry defaults to being selected. Entries entered in error can be deselected. When the list contains all of the desired entities, press <b>Enter</b> >. To deselect all of the entries and return to the One, Multiple, All prompt, press <b>F10</b> >. This exits the list without making a selection.		
	When the picklist contains more than $1-\frac{1}{2}$ times the display size, to search the picklist, press < <b>F7&gt;</b> and enter a partial or full data entry on the provided input line at the end of the picklist. If the data is found, the cursor is repositioned on the found item. If the search fails to find any matching data, a message indicates that no data was found.		
(A)ll	All entities are allowed, subject to applicable screening.		

Access the Ambulatory Data Reports (2) option on the ADM Main Menu.

**Menu Path:** Any Main Menu  $\rightarrow$  ADM (Ambulatory Data Module Main Menu)  $\rightarrow$  2 (Ambulatory Data Reports)

#### **Security Keys:**

KG ADS RPT OUTPUT ANYWHERE (to output reports to screen or slave devices) KG ADS RPT LEGEND OPTION (to make the (E)xpanded legend prompt available)

The Primary Location, Provider, and Allowable Divisions fields in the CHCS User file and the KG User Access file control access to reports in clinics in this menu.

The Ambulatory Data Reports Menu displays (Figure 15-2).

```
STYL
       User Prompt Style
       Appointments with No ADM Records by Clinic ADM Patients with 3<sup>rd</sup> Party Insurance
1
2
3
       ADM Compliance Report
       ADM Records with Unresolved Coding Issues
4
5
       Interface Transmission Status of ADM Record
       Encounter Summary Report by Clinic/Provider
7
       For Clinic Use Only Report
       Encounter Specific Code Report by Clinic/Provider
8
9
       Top Number Encounter Report
10
       Appointment/Encounter Count Report
       Patient Encounter Records Report
11
```

Figure 15-2. Ambulatory Data Reports Menu

## 15.1. Appointments with No ADM Records by Clinic (1) Option

The Appointments with No ADM Records Report sorts by clinic, provider, patient name, and appointment date/time. You can sort the clinics by DMIS ID, MEPRS code, or clinic name. This report displays only appointments without ADM encounters or that were checked in through ADM Check In. It shows a count of appointments for each provider within a clinic.

1. Access the Appointments with No ADM Records by Clinic (1) option on the Ambulatory Data Reports Menu.

**Menu Path:** Any Main Menu  $\rightarrow$  ADM (Ambulatory Data Module Main Menu)  $\rightarrow$  2 (Ambulatory Data Reports)  $\rightarrow$  1 (Appointments with No ADM Records by Clinic)

2. Select (O)ne, (M)ultiple, (A)ll ADM clinics or (Q)uit: A// Select the ADM clinics to include in the report.

3. Select (O)ne, (M)ultiple, (A)ll providers or (Q)uit: A//

Select the providers to include in the report. If more than one clinic is selected, all providers are selected by default. If only one clinic was previously selected, you can specify which providers within the clinic to include in the report.

4. Select (D)MIS, (M)EPR, (C)linic clinic sort order or (Q)uit: C//

Select the sort order for the selected clinics.

5. Select (M)onth and year, (S)pecific start and stop as date range or (Q)uit: S//

Enter the month or specific date range for the report. Acceptable date input format follows the standard FileMan format

6. This may be a COMPLEX report. Please queue it to print during the night or other non-peak hours. Printing it NOW may impact other users on the system.

Do you want to proceed with this report?

Type **Y** to proceed.

7. Queue to DEVICE:

Enter the name of the output device.

8. Requested start time: NOW//

Enter the date/time to run the run the report; e.g., for 2:00am tomorrow, enter T+1@1400.

The message displays: TASKED SUCCESSFULLY (xxxx) where xxxx is the TaskMan job number

9. Press < Return > to continue:

Press **<Enter>** to return to the Ambulatory Data Reports Menu.

Figure 15-3 shows sample output.

22 Jul 2002@1448 For Official Use Only Page Ambulatory Data Module Appointments with No ADM Records Report From: 01 Jan 2002 Thru: 22 Jul 2002			
	BAAA Clinic: INTERNAL MEDICINE		
Provider Patient	Appointment Date/Time Type	Status	
DOCTOR, AM PATIENT, ONE PATIENT, TWO DOCTOR, AM Total	22Mar2002@0533 FU 29May2002@0820 EST 2	WALK-IN WALK-IN	
22 Jul 2002@1448	For Official Use Only Ambulatory Data Module Appointments with No ADM Records Report From: 01 Jan 2002 Thru: 22 Jul 2002	Page 2	
DMIS: 0050 MEPR:	BAAA Clinic: INTERNAL MEDICINE (continued)		
Provider Patient	Appointment Date/Time Type	Status	
DOCTOR, PM PATIENT, THREE PATIENT, FOUR PATIENT, FIVE	25Mar2002@0809 WI 25Mar2002@0826 EKG 25Mar2002@0819 WI	WALK-IN WALK-IN WALK-IN WALK-IN	

Figure 15-3. Appointments with No ADM Records Report – Single Clinic

# 15.2. ADM Patients with 3<sup>rd</sup> Party Insurance (2) Option

The ADM Patients with 3<sup>rd</sup> Party Insurance Report provides insurance policy information based on the appointment date and the effective dates of the policy. Select patient appointments by one, multiple, or all clinics and one, multiple, or all patients within a specified report date range. The ICD-9, CPT/HCPCS, and E&M codes display on the output in the same order as entered.

1. Access the ADM Patients with 3<sup>rd</sup> Party Insurance (2) option on the Ambulatory Data Reports Menu.

**Menu Path:** Any Main Menu  $\rightarrow$  ADM (Ambulatory Data Module Main Menu)  $\rightarrow$  2 (Ambulatory Data Reports)  $\rightarrow$  2 (ADM Patients with 3<sup>rd</sup> Party Insurance)

2. Select (O)ne, (M)ultiple, (A)ll ADM clinics or (Q)uit: A//

Enter the ADM clinics to include in the report.

3. Select (O)ne, (M)ultiple, (A)ll patient or (Q)uit: A//

Enter the patients to include in the report.

4. Include appointments (W)ith, with(O)ut, (B)oth insured and non-insured insurance coverage or (Q)uit: W//

Type W to show only appointments that have insurance coverage,

type O to only show appointments that have no insurance coverage, or

type **B** to show all appointments regardless of insurance coverage.

5. Select (M)onth and year, (S)pecific start and stop as date range or (O)uit: S//

Enter the month or specific date range for the report. Acceptable date input format follows the standard FileMan format.

6. This may be a COMPLEX report. Please queue it to print during the night or other non-peak hours. Printing it NOW may impact other users on the system.

Do you want to proceed with this report?

Type **Y** to proceed.

7. Oueue to DEVICE:

Enter the name of the output device.

8. Requested start time: NOW//

Enter the date/time to run the run the report; e.g., for 2:00am tomorrow, enter T+1@1400.

The message displays: TASKED SUCCESSFULLY (xxxx) where xxxx is the TaskMan job number.

9. Press <Return> to continue:

Press **<Enter>** to return to the Ambulatory Data Reports Menu.

Figure 15-4 shows sample output.

23 Jul 2002@0914 For Official Use Only Page 1 Ambulatory Data Module ADM Patient Third Party Insurance From: 01 Jan 2000 Thru: 23 Jul 2002			
Patient: PATIENT,ONE		FMP/SS	N: 30/000-00-0001
	 01 MICHELLE ST		
	LDOSTA, GA 31602		
Phone: 91	2 247 8019		
Clinic: BH Provider: DO MEPRS BH	Apr 2002@1308 AA PRIMARY CARE SERV CTOR,PM AA LK-IN	'ICES	
Insurance Effective D Type/Rank Expiration			Relationship
P/T: 02 Apr 2001 02 Apr 2003	EBP INS SVCS 435549816		
S/P: 29 Sep 2001 26 Jul 2003	AETNA MDBKXL-QL-435	PATIENT,TWO Billable (Both Inpat	SPOUSE ient and Outpatie
ICD-9 Dx Short Desc	ription		Priority
401.1 BENIGN HYPERT			1
307.81 TENSION HEADA			2
V07.4 POSTMENPSL HR	MN REPL THERAPY		3
=======================================		=======================================	=========
E&M Code Description		Mod1 Mod2 Mod	3 Dx Level Units
99215 OFFICE/OUTPA 99354 PROLONGED SE		24	1,2,3 1 1,2,3 1
CPT/HCPCS Description		Mod1 Mod2 Mod	3 Dx Level Units
36425 ESTABLISH AC			1,2,3 1
27299 PELVIS/HIP J			3 1
Q0111 WET MOUNTS/	N PREPARATIONS		3 2

Figure 15-4. ADM Patients with 3<sup>rd</sup> Party Insurance Report – Single Clinic

# 15.3. ADM Compliance Report (3) Option

The ADM Compliance Report provides statistical information on completed and incomplete ADM encounters. It summarizes the complete and incomplete status of PAS appointments in various combinations of clinic, provider, and appointment status based upon the user-specified search and filtering criteria. The report may be run for count, non-count, error non-count, or both count and non-count.

1. Access the ADM Compliance Report (3) option on the Ambulatory Data Reports Menu.

**Menu Path:** Any Main Menu  $\rightarrow$  ADM (Ambulatory Data Module Main Menu)  $\rightarrow$  2 (Ambulatory Data Reports)  $\rightarrow$  3 (ADM Compliance Report)

2. Select (C)linic, (P)rovider as primary sort or (Q)uit: C//

Select one of the following as the primary sort order with which to generate the report.

- a. Type C to choose (C)linic.
  - 1) Select (O)ne, (M)ultiple, (A)ll ADM clinics or (Q)uit: A// Enter the clinics to include in the report.
  - 2) Select (O)ne, (M)ultiple, (A)ll providers clinics or (Q)uit: A//
    If only one clinic was selected, enter the providers for the selected clinic to include in the report.
- b. Type **P** to choose (P)rovider.
  - Summarize by provider (Y)es, (N)o, or (Q)uit: Y//
     Type Y to summarize data by provider within the report.
- 3. Select (D)MIS, (M)EPR, (C)linic clinic sort order or (Q)uit: C// Select the clinic sort order.
- 4. Select (O)ne, (M)ultiple, (A)ll appointment status or (Q)uit: A// Select the appointment status to include in the report.
- 5. Include inpatient admitted by another service (Y)es, (N)o, or (Q)uit: Y//
  Type Y to include inpatients admitted by another service or N to exclude them.
- 6. Select (C)ount, (N)on-Count, (E)rror non-count, (B)oth as workload type or (Q)uit: B//

Type C to include appointment with count workload,

type  ${\bf N}$  to include appointment with non-count workload, or

type **B** for both count and non-count workload appointments.

The CHCS PAS module determines workload.

7. Select (M)onth and year, (S)pecific start and stop as date range or (Q)uit: S//

Enter the month or specific date range for the report. Acceptable date input format follows the standard FileMan format.

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8. This may be a COMPLEX report. Please queue it to print during the night or other non-peak hours. Printing it NOW may impact other users on the system.

Do you want to proceed with this report?

Do you want to proceed with the

Enter **Y** to proceed.

9. Queue to DEVICE:

Enter the name of the output device.

10. Requested start time: NOW//

Enter the date/time to run the run the report; e.g., for 2:00am tomorrow, enter T+1@1400.

The message displays: TASKED SUCCESSFULLY (xxxx) where xxxx is the TaskMan job number.

11. Press < Return > to continue:

Press **<Enter>** to return to the Ambulatory Data Reports Menu.

Figure 15-5 and Figure 15-6 show sample output.

	For Official Us Ambulatory Data I Compliance Report 01 Jan 2000 Thru	a Module ct by Clinic	2	Page 1
DMIS: 0050 MEPR: BAAA Cli				
Provider	PAS Total	Complete ADM Total		=
DOCTOR, AM DOCTOR, PM	13 3	10 0	3 3	77 0
INTERNAL MEDICINE Total	16	10	6	63
	For Official Us Ambulatory Data I Compliance Report 01 Jan 2000 Thru	a Module ct by Clinic	2	Page 2
DMIS: 0050 MEPR: BFDA Cli		ГН 		
Provider		Complete		% Compliance
			ADM Total	-
DOCTOR, AA	1	1	0	100
DOCTOR, AA	:=========	1	0	100
DOCTOR, AA	1	1 1 se Only Module	0	100
DOCTOR, AA  MENTAL HEALTH Total  23 Jul 2002@1050  ADM From:  DMIS: 0050 MEPR: BHAA Cli	1  For Official Us Ambulatory Data I Compliance Report 01 Jan 2000 Thru	1  See Only a Module of by Clinic 1: 23 Jul 2002	0 0	100 100 Page 3
DOCTOR, AA  MENTAL HEALTH Total  23 Jul 2002@1050  ADM From:	for Official Us Ambulatory Data I Compliance Report 01 Jan 2000 Thru	1  See Only a Module at by Clinic 1: 23 Jul 2002	0 0 0	100 100 Page 3
DOCTOR, AA  MENTAL HEALTH Total  23 Jul 2002@1050  ADM From:  DMIS: 0050 MEPR: BHAA Cli	for Official Us Ambulatory Data I Compliance Report 01 Jan 2000 Thru	1 se Only a Module ct by Clinic a: 23 Jul 2002 E SERVICES Complete	0 0 0	100 100 Page 3
DOCTOR, AA  MENTAL HEALTH Total  23 Jul 2002@1050  ADM From:  DMIS: 0050 MEPR: BHAA Cli ====================================	For Official Us Ambulatory Data Compliance Repor Ol Jan 2000 Thru nic: PRIMARY CARI PAS Total	1  se Only a Module ct by Clinic 1: 23 Jul 2002 E SERVICES Complete ADM Total	O O Incomplete ADM Total	100  100  Page 3  Compliance  67
DOCTOR, AA  MENTAL HEALTH Total  23 Jul 2002@1050  ADM From:  DMIS: 0050 MEPR: BHAA Cli  Provider  DOCTOR, AB DOCTOR, AC	For Official Us Ambulatory Data I Compliance Report Ol Jan 2000 Thru nic: PRIMARY CARI PAS Total	1  se Only a Module ct by Clinic u: 23 Jul 2002 E SERVICES Complete ADM Total	O O Incomplete ADM Total	100  100  Page 3  Compliance  67 0
DOCTOR, AA  MENTAL HEALTH Total  23 Jul 2002@1050  ADM From:  DMIS: 0050 MEPR: BHAA Cli ====================================	For Official Us Ambulatory Data Compliance Repor Ol Jan 2000 Thru nic: PRIMARY CARI PAS Total	1  se Only a Module ct by Clinic 1: 23 Jul 2002 E SERVICES Complete ADM Total	O O Incomplete ADM Total	100  100  Page 3  Compliance  67

Figure 15-5. ADM Compliance Report by Clinic

23 Jul 200	2@1059	Ambı ADM Compli		_	3	Page 1
Provider:	DOCTOR, PI	<b>1</b>				
Clinic	======			Complete ADM Total		
0050 BAAA 0050 BHAA		MEDICINE CARE SERVICES		52 0		5 0
DOCTOR,PM	Total	L	1076	52	1024	5
23 Jul 200	2@1059	Ambı ADM Compli		4	3	Page 2
Provider:	DOCTOR,AI	)				
Clinic				Complete ADM Total		
0050 BHAA	PRIMARY	CARE SERVICES	886	65	821	7
DOCTOR, AD Grand Tota		Total	886 1962	65 117		7 6

Figure 15-6. ADM Compliance Report by Provider

## 15.4. ADM Records with Unresolved Coding Issues Report (4) Option

The ADM Records with Unresolved Coding Issues Report sorts by clinic, provider, patient name, and appointment date/time. It displays only appointments with an encounter status of "Mailed to coders." (The "Mailed to codes" status means that the provider requested coding assistance.)

1. Access the ADM Records with Unresolved Coding Issues Report (4) option on the Ambulatory Data Reports Menu.

**Menu Path:** Any Main Menu  $\rightarrow$  ADM (Ambulatory Data Module Main Menu)  $\rightarrow$  2 (Ambulatory Data Reports)  $\rightarrow$  4 (ADM Records with Unresolved Coding Issues Report)

2. Select (O)ne, (M)ultiple, (A)ll ADM clinics or (Q)uit: A//

Select the ADM clinics to include in the report.

3. Select (O)ne, (M)ultiple, (A)ll providers or (Q)uit: A//

If only one clinic was selected, enter the providers for the selected clinic to include in the report.

4. Select (M)onth and year, (S)pecific start and stop as date range or (Q)uit: S//

Enter the month or specific date range for the report. Acceptable date input format follows the standard FileMan format.

5. This may be a COMPLEX report. Please queue it to print during the night or other non-peak hours. Printing it NOW may impact other users on the system.

Do you want to proceed with this report?

Type **Y** to proceed.

6. Queue to DEVICE:

Enter the name of the output device.

7. Requested start time: NOW//

Enter the date/time to run the run the report; e.g., for 2:00am tomorrow, enter T+1@1400.

The message displays: TASKED SUCCESSFULLY (xxxx) where xxxx is the TaskMan job number

8. Press < Return > to continue:

Press **<Enter>** to return to the Ambulatory Data Reports Menu.

Figure 15-7 shows sample output.

23 Jul 2002@1156 For Official Use Only Page 1
Ambulatory Data Module
ADM Records with Unresolved Coding Issues
From: 01 Jan 1990 Thru: 23 Jul 2002

BHAA PRIMARY CARE SERVICES
Provider
Patient Appt Date/Time Status
DOCTOR,BB
PATIENT,FIVE 18Apr2002@1030 WALK-IN
.

Figure 15-7. ADM Pending Records Report

### 15.5. Interface Transmission Status of ADM Record (5) Option

The Interface Transmission Status of ADM Record option sorts by ADM clinic and displays the current SADR transmission status for ADM patient records. You may specify clinics be sorted by DMIS ID, MEPRS code, or clinic name.

1. Access the Interface Transmission Status of ADM Record (5) option on the Ambulatory Data Reports Menu.

**Menu Path:** Any Main Menu  $\rightarrow$  ADM (Ambulatory Data Module Main Menu)  $\rightarrow$  2 (Ambulatory Data Reports)  $\rightarrow$  5 (Interface Transmission Status of ADM Record)

2. Select (C)linic, (P)rovider as primary sort or (Q)uit: C//
Select one of the following as the primary sort order with which to generate the report.

- a. Type C to choose (C)linic.
  - 1) Select (O)ne, (M)ultiple, (A)ll ADM clinics or (Q)uit: A//
    Enter the clinics to include in the report.
  - 2) Select (O)ne, (M)ultiple, (A)ll providers clinics or (Q)uit: A//
    If only one clinic was selected, enter the providers for the selected clinic to include in the report.
- b. Type **P** to choose (P)rovider.
  - Summarize by provider (Y)es, (N)o, or (Q)uit: Y//
     Type Y to summarize data by provider within the report.
- 3. Select (D)MIS, (M)EPR, (C)linic clinic sort order or (Q)uit: C// Select the clinic sort order.
- 4. Select (O)ne, (M)ultiple, (A)ll patient categories or (Q)uit: A// Specify the patient categories to include in the report.
- 5. Select (O)ne, (M)ultiple, (A)ll appointment status or (Q)uit: Specify the appointment status to include in the report.
- 6. Select (E)valuation & Management, (I)CD9, (C)PT diagnostic codes or (Q)uit: Specify type of codes to include in the report. Refer to Table 15-2.

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Table 15-2. Code Sort Fields

Sort Field	Filtering
E&M codes	Select (O)ne, (M)ultiple, (A)ll CPT E&M codes
	Specify which E&M code to include in the report.
ICD9 codes	Select (O)ne, (M)ultiple, (A)ll ICD9 codes
	Specify which ICD-9 code to include in the report.
CPT/HCPCS codes	Select (O)ne, (M)ultiple, (A)ll CPT/HCPCS codes
	Specify which CPT/HCPCS codes to include in the report.

7. Include additional providers (Y)es, (N)o, or (Q)uit:

Type  $\mathbf{Y}$  to include the additional providers that were entered in the encounter record or  $\mathbf{N}$  to exclude them.

8. Select (M)onth and year, (S)pecific start and stop as date range or (Q)uit: S//

Enter the month or specific date range for the report. Acceptable date input format follows the standard FileMan format.

9. This may be a COMPLEX report. Please queue it to print during the night or other non-peak hours. Printing it NOW may impact other users on the system.

Do you want to proceed with this report?

Type **Y** to proceed.

10. Queue to DEVICE:

Enter the name of the output device.

11. Requested start time: NOW//

Enter the date/time to run the run the report; e.g., for 2:00am tomorrow, enter T+1@1400.

The message displays: TASKED SUCCESSFULLY (xxxx) where xxxx is the TaskMan job number.

12. Press < Return > to continue:

Press **Enter**> to return to the Ambulatory Data Reports Menu.

Figure 15-8 shows sample output.

02 7 1 000	201000	- occ. '	] II 0 ]		- 1
23 Jul 2002	2@1220	For Officia			Page 1
	T	Ambulatory			
		ace Status of A m: 01 Jan 2000			
	FLO	III. UI Jaii 2000	IIILU• 23	0u1 2002	
		linic: INTERNAL		==========	========
Appt Date/1	Time Patient	Name	FMP/SSN	Provider	SADR Status
06 Oct 2001	L@1546 PATIENT	, ONE	20/0000	DOCTOR,PM	COMPLETE
09 Oct 2001	L@2203 PATIENT	,FIVE	20/0000	DOCTOR,PM	ERROR
21 Oct 2001	L@1632 PATIENT	, ONE	20/0000	DOCTOR,PM	COMPLETE
22 Oct 2001	L@1440 PATIENT	,TWO	30/0000	DOCTOR,PM	COMPLETE
22 Oct 2001	L@2147 PATIENT	,FIFTEEN	20/0000	DOCTOR,PM	COMPLETE
28 Nov 2001	L@0600 PATIENT	,SIXTEEN	20/0000	DOCTOR,PM	COMPLETE
21 Dec 2001	L@0134 PATIENT	, ELEVEN	20/0000	DOCTOR,PM	COMPLETE
07 Jan 2002	2@1200 PATIENT	, ONE	20/0000	DOCTOR,PM	COMPLETE
07 Jan 2002	2@1200 PATIENT	,TWELVE	30/0000	DOCTOR,PM	COMPLETE
18 Apr 2002	2@1008 PATIENT	,ONE	20/0000	DOCTOR,PM	COMPLETE
18 Apr 2002	2@1011 PATIENT	, ONE	20/0000	DOCTOR,PM	COMPLETE
18 Apr 2002	2@1012 PATIENT	,THREE	30/0000	DOCTOR,PM	COMPLETE
18 Apr 2002	2@1013 PATIENT	,THREE	30/0000	DOCTOR,PM	PENDING
29 May 2002	2@0820 PATIENT	, FOURTEEN	20/0000	DOCTOR,PM	PENDING
25 Mar 2002	2@1125 PATIENT	,SIX	20/0000	DOCTOR, AB	COMPLETE
16 Oct 2001	L@1001 PATIENT	, SEVEN	98/0000	DOCTOR, AD	COMPLETE
14 Nov 2001		,DENNIS L	20/0000	DOCTOR,PM	COMPLETE
17 Jan 2002	2@1029 PATIENT	, SEVEN	30/0000	DOCTOR, AD	COMPLETE
25 Mar 2002	2@0834 PATIENT	,EIGHT	20/0000	DOCTOR, AD	COMPLETE
25 Mar 2002			20/0000	DOCTOR, PD	COMPLETE
25 Mar 2002	2@1015 PATIENT	,TEN	01/0000	DOCTOR, AD	COMPLETE
02 Apr 2002	2@1308 PATIENT	,TWENTY	30/0000	DOCTOR, PM	COMPLETE
18 Apr 2002		, TWENTYONE	30/0000	DOCTOR, AD	COMPLETE
18 Apr 2002		,THIRTEEN	30/0000	DOCTOR, AD	PENDING
18 Apr 2002		, FOURTEEN	30/0000	DOCTOR, AD	COMPLETE
18 Apr 2002		, FOURTEEN	30/0000	DOCTOR, PD	PENDING
18 Apr 2002		, FOURTEEN	30/0000	DOCTOR, PD	PENDING
18 Apr 2002		, SEVENTEEN	02/0000	DOCTOR, PD	PENDING
23 Apr 2002	2@0700 PATIENT	,TWENTYTWO	30/0000	DOCTOR, AD	PENDING
23 Apr 2002	2@0800 PATIENT	,TWENTYTHREE	01/0000	DOCTOR, AD	COMPLETE
23 Apr 2002		,SIXTEEN	03/0000	DOCTOR, AD	PENDING
23 Apr 2002		,THIRTY	30/0000	DOCTOR, AD	COMPLETE
10 May 2002			20/0000	DOCTOR, PM	COMPLETE
	PENDI	NG	8	24 %	
	ERROR		1	3 %	
	COMPL		24	73 %	
	Grand	Total	33	100 %	

Figure 15-8. ADM Pending Records Report

### 15.6. Encounter Summary Report by Clinic/Provider (6) Option

The Encounter Summary Report by Clinic/Provider summarizes E&M, ICD-9, or CPT/HCPCS diagnostic codes with the count for each appointment status by ADM clinic or provider. It summarizes each appointment status within the patient category. It may also include the additional providers identified in the encounter.

1. Access the Encounter Summary Report by Clinic/Provider (6) option on the Ambulatory Data Reports Menu.

**Menu Path:** Any Main Menu  $\rightarrow$  ADM (Ambulatory Data Module Main Menu)  $\rightarrow$  2 (Ambulatory Data Reports)  $\rightarrow$  6 (Encounter Summary Report by Clinic/Provider)

2. Select (C)linic, (P)rovider as primary sort or (Q)uit: C//

Select one of the following as the primary sort order with which to generate the report.

- a. Type C to choose (C)linic.
  - 1) Select (O)ne, (M)ultiple, (A)ll ADM clinics or (Q)uit: A//
    Enter the clinics to include in the report.
  - Select (O)ne, (M)ultiple, (A)ll providers clinics or (Q)uit: A//
     If only one clinic was selected, enter the providers for the selected clinic to include in the report.
- b. Type **P** to choose (P)rovider.
  - Summarize by provider (Y)es, (N)o, or (Q)uit: Y//
     Type Y to summarize data by provider within the report.
- 3. Select (O)ne, (M)ultiple, (A)ll patient categories or (Q)uit: A// Specify the patient categories to include in the report.
- 4. Select (O)ne, (M)ultiple, (A)ll appointment status or (Q)uit: Specify the appointment status to include in the report.
- 5. Select (E)valuation & Management, (I)CD9, (C)PT diagnostic codes or (Q)uit: Specify type of codes to include in the report. Refer to Table 15-2.
- 6. Include additional providers (Y)es, (N)o, or (Q)uit:

Type  $\mathbf{Y}$  to include the additional providers that were entered in the encounter record or  $\mathbf{N}$  to exclude them.

- 7. Select (M)onth and year, (S)pecific start and stop as date range or (Q)uit: S//
  Enter the month or specific date range for the report. Acceptable date input format follows the standard FileMan format.
- 8. This may be a COMPLEX report. Please queue it to print during the night or other non-peak hours. Printing it NOW may impact other users on the system. Do you want to proceed with this report?

Type **Y** to proceed.

### 9. Queue to DEVICE:

Enter the name of the output device.

### 10. Requested start time: NOW//

Enter the date/time to run the run the report; e.g., for 2:00am tomorrow, enter T+1@1400.

The message displays: TASKED SUCCESSFULLY (xxxx) where xxxx is the TaskMan job number.

#### 11. Press < Return > to continue:

Press **<Enter>**to return to the Ambulatory Data Reports Menu.

Figure 15-9 and Figure 15-10 show sample output.

```
24 Jul 2002@0751
                        For Official Use Only
                                                            Page
                                                                   1
                        Ambulatory Data Module
                 ICD9 Encounter Summary Report by Clinic
                  From: 18 Apr 2002 Thru: 18 Apr 2002
MEPR: BAAA Clinic: INTERNAL MEDICINE
______
Provider Patient Appt
                                  Additional Providers
        Category Status
______
DOCTOR, PM
        USAF RET LOS OFFICER (F31)
                 WALK-IN Totals
                    1 101 VINCENT'S ANGINA
                    1 405.99 SECOND HYPERTENSION NEC
                    1 427.9
                             CARDIAC DYSRHYTHMIA NOS
                    1 786.59 CHEST PAIN NEC
        USAF RET LOS OFFICER (F31) Totals
           1 101 VINCENT'S ANGINA
           1 405.99 SECOND HYPERTENSION NEC
           1 427.9 CARDIAC DYSRHYTHMIA NOS
           1 786.59 CHEST PAIN NEC
DOCTOR, PM
             Totals
              1 101 VINCENT'S ANGINA
   2 WALK-IN
                1 405.99 SECOND HYPERTENSION NEC
                1 427.9 CARDIAC DYSRHYTHMIA NOS
1 786.59 CHEST PAIN NEC
BAAA INTERNAL MEDICINE Totals
   2 WALK-IN 1 101 VINCENT'S ANGINA
                1 405.99 SECOND HYPERTENSION NEC
                1 427.9 CARDIAC DYSRHYTHMIA NOS
                1 786.59 CHEST PAIN NEC
Total providers: 1
Total encounters: 2
Total number of codes: 4
Grand Totals
           VINCENT'S ANGINA
   1 101
   1 405.99 SECOND HYPERTENSION NEC
   1 427.9
            CARDIAC DYSRHYTHMIA NOS
   1 786.59 CHEST PAIN NEC
Total providers: 1
Total encounters: 2
Total number of codes: 4
```

Figure 15-9. Encounter Summary Report by Clinic

```
24 Jul 2002@0753
                        For Official Use Only
                                                           Page
                                                                  1
                        Ambulatory Data Module
               ICD9 Encounter Summary Report by Provider
                  From: 18 Apr 2002 Thru: 18 Apr 2002
Provider: DOCTOR,PM
______
       Patient Appt
                                  Additional Providers
        Category Status
______
BAAA INTERNAL MEDICINE
        USAF RET LOS OFFICER (F31)
                WALK-IN Totals
                    1 101 VINCENT'S ANGINA
                    1 405.99 SECOND HYPERTENSION NEC
                    1 427.9
                            CARDIAC DYSRHYTHMIA NOS
                    1 786.59 CHEST PAIN NEC
        USAF RET LOS OFFICER (F31) Totals
           1 101 VINCENT'S ANGINA
           1 405.99 SECOND HYPERTENSION NEC
           1 427.9 CARDIAC DYSRHYTHMIA NOS
           1 786.59 CHEST PAIN NEC
BAAA INTERNAL MEDICINE Totals
   2 WALK-IN 1 101 VINCENT'S ANGINA
               1 405.99 SECOND HYPERTENSION NEC
               1 427.9 CARDIAC DYSRHYTHMIA NOS
               1 786.59 CHEST PAIN NEC
Total providers: 1
Total encounters: 2
Total number of codes: 4
DOCTOR,PM
             Totals
              1 101 VINCENT'S ANGINA
   2 WALK-IN
               1 405.99 SECOND HYPERTENSION NEC
               1 427.9 CARDIAC DYSRHYTHMIA NOS
               1 786.59 CHEST PAIN NEC
Grand Totals
   1 101
            VINCENT'S ANGINA
   1 405.99 SECOND HYPERTENSION NEC
   1 427.9
            CARDIAC DYSRHYTHMIA NOS
   1 786.59 CHEST PAIN NEC
Total providers: 1
Total encounters: 2
Total number of codes: 4
```

Figure 15-10. Encounter Summary Report by Provider

# 15.7. For Clinic Use Only Report (7) Option

The For Clinic Use Only Report provides a detailed listing of the For Clinic Use Only (FCUO) codes and descriptions applied to the patient encounter by ADM clinic. You can select and sort individual clinics by DMIS ID, MEPRS code, or Clinic name. This report totals the number of occurrences of each FCUO code for each appointment status within a clinic and only includes completed and successfully transmitted SADR encounters.

1. Access the For Clinic Use Only Report (7) option on the Ambulatory Data Reports Menu.

**Menu Path:** Any Main Menu  $\rightarrow$  ADM (Ambulatory Data Module Main Menu)  $\rightarrow$  2 (Ambulatory Data Reports)  $\rightarrow$  7 (For Clinic Use Only Report)

2. Select (O)ne, (M)ultiple, (A)ll ADM clinics or (Q)uit: A// Specify the ADM clinics to include in the report.

3. Select (D)MIS, (M)EPR, (C)linic clinic sort order or (Q)uit: C// Select the sort order for clinics.

4. Select (O)ne, (M)ultiple, (A)ll appointment status or (Q)uit:

Specify the appointment status to include in the report.

5. Select (O)ne, (M)ultiple, (A)ll patient categories or (Q)uit: A//

Specify the patient categories to include in the report.

6. Select (M)onth and year, (S)pecific start and stop as date range or (Q)uit: S//

Enter the month or specific date range for the report. Acceptable date input format follows the standard FileMan format.

7. This may be a COMPLEX report. Please queue it to print during the night or other non-peak hours. Printing it NOW may impact other users on the system.

Do you want to proceed with this report?

Type **Y** to proceed.

8. Queue to DEVICE:

Enter the name of the output device.

9. Requested start time: NOW//

Enter the date/time to run the run the report; e.g., for 2:00am tomorrow, enter T+1@1400.

The message displays: TASKED SUCCESSFULLY (xxxx) where xxxx is the TaskMan job number.

10. Press < Return > to continue:

Press **<Enter>** to return to the Ambulatory Data Reports Menu.

Figure 15-11 shows sample output.

```
24 Jul 2002@0816
                        For Official Use Only
                                                           Page
                        Ambulatory Data Module
                    For Clinic Use Only by Clinic
                  From: 01 Jan 2000 Thru: 24 Jul 2002
DMIS: 0050 MEPR: BAAA Clinic: INTERNAL MEDICINE
______
FCUO PatCat Patient Name
             FMP/SSN
                          Appt Date/Time Status MEPR Provider
______
Motor Vehicle Accident - Liberty (C)
    USAF FAM MBR RET (F43)
           PATIENT, THIRTEEN
              30/000-00-0000 22 Oct 2001@1440 WALK-IN BAAA DOCTOR,PM
              E&M 99201 OFFICE/OUTPATIENT VISIT, NEW
              ICD9 003.9
                        SALMONELLA INFECTION NOS
FCUO - Motor Vehicle Accident - Liberty (C) Totals
   1 WALK-IN
Clinic FCUO Totals
Motor Vehicle Accident - Liberty (C)
     1 WALK-IN
Total number of completed encounters for clinic: 1
FCUO Grand Totals
Motor Vehicle Accident - Liberty (C)
     1 WALK-IN
Total number of completed encounters: 1
```

Figure 15-11. For Clinic Use Only Report

### 15.8. Encounter Specific Code Report by Clinic/Provider (8) Option

The Encounter Specific Code Report by Clinic/Provider summarizes E&M, ICD-9, or CPT/HCPCS diagnostic codes with the count for each appointment status by ADM clinic or provider. The count of each E&M, ICD-9, or CPT/HCPCS code displays for each patient category by clinic and provider.

1. Access the Encounter Specific Code Report by Clinic/Provider (8) option on the Ambulatory Data Reports Menu.

**Menu Path:** Any Main Menu  $\rightarrow$  ADM (Ambulatory Data Module Main Menu)  $\rightarrow$  2 (Ambulatory Data Reports)  $\rightarrow$  8 (Encounter Specific Code Report by Clinic/Provider)

2. Select (C)linic, (P)rovider as primary sort or (Q)uit: C//

Select one of the following as the primary sort order with which to generate the report.

- a. Type C to choose (C)linic.
  - 1) Select (O)ne, (M)ultiple, (A)ll ADM clinics or (Q)uit: A//
    Enter the clinics to include in the report.
  - 2) Select (O)ne, (M)ultiple, (A)ll providers clinics or (Q)uit: A//
    If only one clinic was selected, enter the providers for the selected clinic to include in the report.
- b. Type **P** to choose (P)rovider.
  - Summarize by provider (Y)es, (N)o, or (Q)uit: Y//
     Type Y to summarize data by provider within the report.
- 3. Select (O)ne, (M)ultiple, (A)ll patient categories or (Q)uit: A// Specify the patient categories to include in the report.
- 4. Select (O)ne, (M)ultiple, (A)ll appointment status or (Q)uit: Specify the appointment status to include in the report.
- 5. Select (E)valuation & Management, (I)CD9, (C)PT diagnostic codes or (Q)uit: Specify type of codes to include in the report. Refer to Table 15-2.
- 6. Select (M)onth and year, (S)pecific start and stop as date range or (Q)uit: S//
  Enter the month or specific date range for the report. Acceptable date input format follows the standard FileMan format.
- 7. This may be a COMPLEX report. Please queue it to print during the night or other non-peak hours. Printing it NOW may impact other users on the system. Do you want to proceed with this report? Type Y to proceed.
- 8. Queue to DEVICE:

Enter the name of the output device.

## 9. Requested start time: NOW//

Enter the date/time to run the run the report; e.g., for 2:00am tomorrow, enter T+1@1400.

The message displays: TASKED SUCCESSFULLY (xxxx) where xxxx is the TaskMan job number.

### 10. Press < Return > to continue:

Press **<Enter>** to return to the Ambulatory Data Reports Menu.

Figure 15-12 shows sample output.

```
24 Jul 2002@0843
                        For Official Use Only
                                                            Page
                        Ambulatory Data Module
              Encounter Specific ICD9 Code Report by Clinic
                  From: 01 Jan 2002 Thru: 24 Jul 2002
MEPR: BAAA Clinic: INTERNAL MEDICINE
______
Provider PatCat Patient Name
                 FMP/SSN
                               P/C SEX DOB
                                               PHONE
                 Appt Date/Time Status MEPR
______
DOCTOR, PM
        USAF RET LOS OFFICER (F31)
               PATIENT, ONE
                  20/000-00-0000 F31 M 01/01/1947 555-123-2222
                 18 Apr 2002@1008 WALK-IN BAAA
                  ICD9 101 VINCENT'S ANGINA
                      786.59 CHEST PAIN NEC
                  20/000-00-0000 F31 M 01/01/1947 555-123-3333
                 18 Apr 2002@1011 WALK-IN BAAA
                 ICD9 405.99 SECOND HYPERTENSION NEC
                      427.9 CARDIAC DYSRHYTHMIA NOS
        USAF RET LOS OFFICER (F31) Totals
           1 101
                   VINCENT'S ANGINA
           1 405.99 SECOND HYPERTENSION NEC
           1 427.9 CARDIAC DYSRHYTHMIA NOS
           1 786.59 CHEST PAIN NEC
DOCTOR,PM Totals
1 101 VINCENT'S ANGINA
   1 405.99 SECOND HYPERTENSION NEC
   1 427.9 CARDIAC DYSRHYTHMIA NOS
   1 786.59 CHEST PAIN NEC
BAAA INTERNAL MEDICINE Totals
   1 101 VINCENT'S ANGINA
   1 405.99 SECOND HYPERTENSION NEC
   1 427.9 CARDIAC DYSRHYTHMIA NOS
   1 786.59 CHEST PAIN NEC
Grand Totals
   1 101
            VINCENT'S ANGINA
   1 405.99 SECOND HYPERTENSION NEC
   1 427.9
            CARDIAC DYSRHYTHMIA NOS
   1 786.59 CHEST PAIN NEC
```

Figure 15-12. Encounter Specific Code Report by Clinic/Provider

### 15.9. Top Number Encounter Report (9) Option

The Top Number Encounter Report displays the top-ranged E&M, ICD-9, or CPT/HCPCS diagnostic codes with the count for each patient category by ADM clinic or provider. You can specify the number of top levels. The report breaks out the count for each E&M, ICD-9, or CPT/HCPCS code by provider only when the provider has been selected as the primary sort.

1. Access the Top Number Encounter Report (9) option on the Ambulatory Data Reports Menu.

**Menu Path:** Any Main Menu  $\rightarrow$  ADM (Ambulatory Data Module Main Menu)  $\rightarrow$  2 (Ambulatory Data Reports)  $\rightarrow$  9 (Top Number Encounter Report)

2. Select (C)linic, (P)rovider as primary sort or (Q)uit: C//

Select one of the following as the primary sort order with which to generate the report.

- a. Type C to choose (C)linic.
  - 1) Select (O)ne, (M)ultiple, (A)ll ADM clinics or (Q)uit: A//
    Enter the clinics to include in the report.
  - Select (O)ne, (M)ultiple, (A)ll providers clinics or (Q)uit: A//
     If only one clinic was selected, enter the providers for the selected clinic to include in the report.
- b. Type **P** to choose (P)rovider.
  - 1) Summarize by provider (Y)es, (N)o, or (Q)uit: Y//
    Type **Y** to summarize data by provider within the report.
- 3. Select (D)MIS, (M)EPR, (C)linic clinic sort order or (Q)uit: C//
  - Select the clinic sort order.
- 4. Select (E)valuation & Management, (I)CD9, (C)PT diagnostic codes or (Q)uit: Specify type of codes to include in the report. Refer to Table 15-2.
- 5. Enter the top number of codes to display (0=All): 0//

Enter the number of top-ranked codes to report or type **0** (zero) to report all rankings.

- 6. Select (O)ne, (M)ultiple, (A)ll patient categories or (Q)uit: A//
  - Specify the patient categories to include in the report.
- 7. Select (M)onth and year, (S)pecific start and stop as date range or (Q)uit: S//

Enter the month or specific date range for the report. Acceptable date input format follows the standard FileMan format.

8. This may be a COMPLEX report. Please queue it to print during the night or other non-peak hours. Printing it NOW may impact other users on the system.

Do you want to proceed with this report?

Type **Y** to proceed.

# 9. Queue to DEVICE:

Enter the name of the output device.

## 10. Requested start time: NOW//

Enter the date/time to run the run the report; e.g., for 2:00am tomorrow, enter T+1@1400.

The message displays: TASKED SUCCESSFULLY (xxxx) where xxxx is the TaskMan job number.

#### 11. Press < Return > to continue:

Press **<Enter>** to return to the Ambulatory Data Reports Menu.

Figure 15-13 shows sample output.

```
24 Jul 2002@1029
                             For Official Use Only
                                                                        Page
                             Ambulatory Data Module
                   Top Number ICD9 Encounter Report by Clinic
                     From: 01 Jan 2002 Thru: 24 Jul 2002
DMIS: 0050 MEPR: BHAA Clinic: PRIMARY CARE SERVICES
______
Patient Category
______
USAF ACTIVE DUTY (F11) Totals
    3 333.1 TREMOR NEC
USAF FAM MBR AD (F41) Totals
   3 333.1 TREMOR NEC
   2 401.1 BENIGN HYPERTENSION
2 V70.5 HEALTH EXAMINATION OF DEFINED
1 250.01 DIABETES MELLITUS WO COMPLIC
1 333.3 TICS OF ORGANIC ORIGIN
1 536.2 PERSISTENT VOMITING
   1 580.81 AC NEPHRITIS IN OTH DIS
   1 780.6 FEVER
   1 802.25 FX ANGLE OF JAW-CLOSED
   1 803.01 CL SKULL FX NEC W/O COMA
   1 807.01 FRACTURE ONE RIB-CLOSED
USAF FAM MBR RET (F43) Totals
   1 307.81 TENSION HEADACHE
   1 356.2 HERED SENSORY NEUROPATHY
1 401.1 BENIGN HYPERTENSION
1 V07.4 POSTMENPSL HRMN REPL THERAPY
USMC FAM MBR DECEASED RETIRED (M47) Totals
   1 420.90 ACUTE PERICARDITIS NOS
0050 BHAA PRIMARY CARE SERVICES Totals
    6 333.1 TREMOR NEC
    3 401.1 BENIGN HYPERTENSION
    2 V70.5 HEALTH EXAMINATION OF DEFINED
Grand Totals
   6 333.1 TREMOR NEC
    3 401.1 BENIGN HYPERTENSION
2 V70.5 HEALTH EXAMINATION OF DEFINED
```

Figure 15-13. Top Number Encounter Report – Single Clinic

### 15.10. Appointment/Encounter Count Report (10) Option

The Appointment/Encounter Count Report provides a detailed accounting of completed encounters by ADM Clinic or Provider. You can select individual clinics and request a report by DMIS ID, MEPRS code, or clinic name. The report contains data for only ADM interface clinics and calculates the number encounters completed in a clinic by selected or all patient categories and selected or all appointment statuses. The report provides grand totals by provider, clinic, and appointment status in the selected sort order.

This report provides the count of appointment status by patient category within the primary sort of ADM clinic or provider. It also provides appointment status count totals for ADM clinic or provider. The clinic may be sorted by DMIS ID, MEPRS code, or clinic name.

1. Access the Appointment/Encounter Count Report (10) option on the Ambulatory Data Reports Menu.

**Menu Path:** Any Main Menu  $\rightarrow$  ADM (Ambulatory Data Module Main Menu)  $\rightarrow$  2 (Ambulatory Data Reports)  $\rightarrow$  10 (Appointment/Encounter Count Report)

2. Select (C)linic, (P)rovider as primary sort or (Q)uit: C//

Select one of the following as the primary sort order with which to generate the report.

- a. Type C to choose (C)linic.
  - 1) Select (O)ne, (M)ultiple, (A)ll ADM clinics or (Q)uit: A// Enter the clinics to include in the report.
  - 2) Select (O)ne, (M)ultiple, (A)ll providers clinics or (Q)uit: A// If only one clinic was selected, enter the providers for the selected clinic to include in the report.
- b. Type **P** to choose (P)rovider.
  - 1) Summarize by provider (Y)es, (N)o, or (Q)uit: Y//
    Type **Y** to summarize data by provider within the report.
- 3. Select (D)MIS, (M)EPR, (C)linic clinic sort order or (Q)uit: C// Select the sort order for clinics.
- 4. Select (O)ne, (M)ultiple, (A)ll appointment status or (Q)uit:

Specify the appointment status to include in the report.

- 5. Select (O)ne, (M)ultiple, (A)ll patient categories or (Q)uit: A// Specify the patient categories to include in the report.
- 6. Select (M)onth and year, (S)pecific start and stop as date range or (Q)uit: S//
  Enter the month or specific date range for the report. Acceptable date input format follows the standard FileMan format

7. This may be a COMPLEX report. Please queue it to print during the night or other non-peak hours. Printing it NOW may impact other users on the system.

Do you want to proceed with this report?

Type **Y** to proceed.

8. Queue to DEVICE:

Enter the name of the output device.

9. Requested start time: NOW//

Enter the date/time to run the report; e.g., to run the report tomorrow at 2:00am, enter T+1@1400.

The message displays: TASKED SUCCESSFULLY (xxxx) where xxxx is the TaskMan job number.

10. Press < Return > to continue:

Press **<Enter>** to return to the Ambulatory Data Reports Menu.

Figure 15-14 and Figure 15-15 show sample output.

```
24 Jul 2002@1101
                       For Official Use Only
                                                         Page
                       Ambulatory Data Module
              Appointment/Encounter Count Report by Clinic
                 From: 01 Jan 2002 Thru: 24 Jul 2002
DMIS: 0050 MEPR: BAAA Clinic: INTERNAL MEDICINE
______
Provider Patient Category
______
DOCTOR, PM
       USAF FAM MBR RET (F43) Totals
           1 LWOBS
           2 WALK-IN
        USAF RET LOS ENLISTED (F31) Totals
           1 WALK-IN
        USAF RET LOS OFFICER (F31) Totals
           1 LWOBS
           2 WALK-IN
DOCTOR,PM
            Totals
   2 LWOBS
   5 WALK-IN
Total completed encounters: 5
0050 BAAA INTERNAL MEDICINE Totals
   2 LWOBS
   5 WALK-IN
Total providers: 1
Total completed encounters: 5
Grand Totals
   2 LWOBS
   5 WALK-IN
Total providers: 1
Total completed encounters: 5
```

Figure 15-14. Appointment/Encounter Count Report by Clinic

```
24 Jul 2002@1103
                        For Official Use Only
                                                            Page
                        Ambulatory Data Module
              Appointment/Encounter Count Report by Provider
                  From: 01 Jan 2002 Thru: 24 Jul 2002
Provider: DOCTOR,PM
______
       Patient Category
______
0050 BAAA INTERNAL MEDICINE
        USAF FAM MBR RET (F43) Totals
           1 LWOBS
            2 WALK-IN
        USAF RET LOS ENLISTED (F31) Totals
           1 WALK-IN
        USAF RET LOS OFFICER (F31) Totals
           1 LWOBS
            2 WALK-IN
0050 BAAA INTERNAL MEDICINE Totals
   2 LWOBS
   5 WALK-IN
Total providers: 1
Total completed encounters: 5
0050 BHAA PRIMARY CARE SERVICES
        USAF ACTIVE DUTY (F11) Totals
           1 WALK-IN
        USAF FAM MBR RET (F43) Totals
           1 WALK-IN
0050 BHAA PRIMARY CARE SERVICES Totals
   2 WALK-IN
Total providers: 1
Total completed encounters: 2
DOCTOR, PM
             Totals
   2 LWOBS
   7 WALK-IN
Total completed encounters: 7
Grand Totals
   2 LWOBS
   7 WALK-IN
Total providers: 1
Total completed encounters: 7
```

Figure 15-15. Appointment/Encounter Count Report by Provider

## **15.11.** Patient Encounter Records (11) Option

The Patient Encounter Records (11) option searches for ADM appointments according to a user-specified date range, DMIS ID, and SADR status of Complete, Pending, or both. User-specified primary and secondary sort criteria filter and sort the appointments even further. Appointments that meet all search criteria display in a picklist. The order of the primary (main) picklist corresponds to the primary sort, and the order of the secondary (subordinate) picklist corresponds to the secondary sort. You can make repeated selections from the picklist, then print the selected data to a user-specified device.

1. Access Patient Encounter Records (11) option on the Ambulatory Data Reports Menu.

**Menu Path:** Any Main Menu  $\rightarrow$  ADM (Ambulatory Data Module Main Menu)  $\rightarrow$  2 (Ambulatory Data Reports)  $\rightarrow$  11 (Patient Encounter Records)

#### 2. Report Start Date:

Enter the start date. Or press **Enter**>without entering a date or press **followed by Enter**> to return to the Ambulatory Data Reports Menu.

#### 3. Report Stop Date:

Enter the stop date. Or press **<Enter>**without a date or press **^** followed by **<Enter>** to exit to the Report Start Date prompt.

#### 4. Select DMIS ID:

Enter the four-digit DMIS ID, or press **<Enter>** without a DMIS ID to return to the Report Start Date prompt, or press ^ followed by **<Enter>** to exit the program.

5. Select (L)ocation, (P)rovider, P(a)tient, Appt (D)ate, Appt (S)tatus, Appt (T)ype as primary sort or (Q)uit:

Select the data type for the primary sort field. Table 15-3 is a matrix of the fields and the available filtering.

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Table 15-3. Patient Encounter Records Sort Fields

Sort Field	Filtering
Location	Select (O)ne, (M)ultiple, (A)ll ADM clinics
	Specify the clinics to include in the report.
Provider	Select (O)ne, (M)ultiple, (A)ll ADM clinics if primary-sort field or if O)ne was specified for Location as the primary sort field.
	Specify the providers to include in the report.
Patient	Select (O)ne, (M)ultiple, (A)ll patients
	Specify the patients to include in the report.
Appointment Date	Defaults to the report date range.
Appointment Status	Select (O)ne, (M)ultiple, (A)ll appointment status
	Specify the appointment status to include in the report.
Appointment Type	Defaults to All.

6. Select (L)ocation, (P)rovider, P(a)tient, Appt (D)ate, Appt (S)tatus, Appt (T)ype as second level sort or (Q)uit:

Select the data type for the secondary sort. This prompt changes according to the field selected for the primary sort. The primary-sort field does not display on the prompt for the second -level sort. Refer to Table 15-3.

7. Do you want to include (C)ompleted records only, (P)ending records only, (B)oth (Q)uit: B//

Type C to include only Completed records, or

type P to include only Pending records, or

type **B** to include both Complete and Pending records in the report.

The following messages may display, depending on how much data is being searched:

```
Sorting...
Building Display Data....
```

#### Aborting the Search/Sort

The Search/Sort phase of this report can be aborted at any time by using the key combination of CONTROL and C. When pressed the Search/Sort is aborted and control is returned to the MENU or APPLICATION that launched this report.

Since the search for this report is performed in the foreground, the user may terminate a search that is taking too long because of the amount of data included through the user-specified search criteria.

When the search is complete, a picklist for the primary-sort field displays. Figure 15-16 shows a primary sort by patient and a secondary sort by the Appointment Date.

```
Patient Encounter Records Report
             DMIS ID: 0050 347TH MEDICAL GROUP
Primary Sort: Patient (All) Start Date: 01Jan02
Second Level Sort: Appointment Date (All) End Date: 24Jul02
  Patient Name
  PATIENT, ONE
  PATIENT, TWO
  PATIENT, THREE
  PATIENT, FOUR
  PATIENT, FIVE
  PATIENT, SIX
  PATIENT, SEVEN
  PATIENT, EIGHT
  PATIENT, NINE
+ PATIENT, TEN
______
Use the SELECT key to select all Appointment Dates for a Patient
or use the F9 key to make selections from an Appointment Date list
or use the F7 key to search the Patient list.
```

Figure 15-16. Primary Sort by Patient and Secondary Sort by Appointment Date

8. Use the arrow keys to position the cursor on the item and press <**F9**> to view and select the second-level sort for any primary-sort item.

Figure 15-17 shows a sample result if the cursor was positioned on the first entry, PATIENT, ONE.

```
Patient Encounter Records Report

DMIS ID: 0050 347TH MEDICAL GROUP

Primary Sort: PATIENT,ONE

Second Level Sort: Appointment Date (All)

Appt Date

Location

Provider

O7Jan2002@1200 BAAA INTERNAL MEDICINE DOCTOR,PM

18Apr2002@1008 BAAA INTERNAL MEDICINE DOCTOR,PM

18Apr2002@1011 BAAA INTERNAL MEDICINE DOCTOR,PM

WALK-IN WI C

18Apr2002@1011 BAAA INTERNAL MEDICINE DOCTOR,PM

WALK-IN ROU C

Use the SELECT key to select specific Appointment Dates for a Patient.
```

Figure 15-17. Select from an Appointment Date List Using <F9>

You can select data for primary or secondary sorts. Selecting data at the primary-sort level outputs all items at the secondary level on the report. Selecting data at the secondary-sort level outputs only those items on the report for the item in the primary list. A selection on the primary list overrides any selections made at the secondary level for the primary item.

Table 15-4 describes the how to navigate the primary and secondary picklists.

**Table 15-4.** Navigation Keys

Key	Primary Picklist Action	Secondary Picklist Action
<f7></f7>	Search Patient Name list	Go to Bottom of Appt Date list
<f8></f8>	Go to Top of Patient Name list	Go to Top of Appt Date list
<f9></f9>	Enter Appt Date list	
<f10></f10>	Abort - Exit list discarding selections	Abort - Exit list discarding selections
<f11></f11>	Mark all entries in window	Mark all entries in window
<select> (or <end>)</end></select>	Mark entry	Mark entry
<enter></enter>	Exit list/Process selections	Exit list/Process selections
Down-arrow key	Move down one line in list	Move down 1 line in list
<page down=""></page>	Next Screen	Next Appt Date list
?	Display Help information	Display Help information

### 11. Press <**F7>** and type **dees** to find Smithy Dees (Figure 15-18).

To search large picklists, press <**F7>** and enter partial or full data fields into the last line of the picklist. If the data is found, cursor is repositioned on the found item. If no item is found, a message indicates that the search found no match.

```
Patient Encounter Records Report
       DMIS ID: 0050 347TH MEDICAL GROUP
   Primary Sort: Patient (All)
                                          Start Date: 01Jan02
Second Level Sort: Appointment Date (All)
                                          End Date: 24Jul02
_____
  Patient Name
______
 PATIENT, ONE
 PATIENT, TWO
  PATIENT, THREE
 PATIENT, FOUR
 DEES, SMITHY
  PATIENT, FIVE
  PATIENT, SIX
  PATIENT, SEVEN
  PATIENT, EIGHT
 dees
                       <---Patient Name
_____
Use the SELECT key to select all Appointment Dates for a Patient
or use the F9 key to make selections from an Appointment Date list
or use the F7 key to search the Patient list.
```

Figure 15-18. Search Patient List Using <F7>

The search finds the entry and positions the cursor on the found item (Figure 15-19).

```
Patient Encounter Records Report
          DMIS ID: 0050 347TH MEDICAL GROUP
     Primary Sort: Patient (All)
                                                           Start Date: 01Jan02
Second Level Sort: Appointment Date (All)
                                                            End Date: 24Jul02
  Patient Name
+ PATIENT, ONE
  PATIENT, TWO
  PATIENT, THREE
  PATIENT, FOUR
 _DEES, SMITHY
  PATIENT, FIVE
  PATIENT, SIX
  PATIENT, SEVEN
  PATIENT, EIGHT
 PATIENT, NINE
Use the SELECT key to select all Appointment Dates for a Patient
or use the F9 key to make selections from an Appointment Date list
or use the F7 key to search the Patient list.
```

Figure 15-19. Cursor at Found Item

9. Press **Select>** to print the information for the one appointment for Smithy Dess (Figure 15-20).

```
Patient Encounter Records Report
        DMIS ID: 0050 347TH MEDICAL GROUP
                                                  Start Date: 01Jan02
    Primary Sort: Patient (All)
Second Level Sort: Appointment Date (All)
                                                  End Date: 24Jul02
  Patient Name
+ PATIENT, ONE
  PATIENT, TWO
  PATIENT, THREE
  PATIENT, FOUR
* DEES, SMITHY
  PATIENT, FIVE
  PATIENT, SIX
  PATIENT, SEVEN
  PATIENT, EIGHT
+ PATIENT, NINE
______
Use the SELECT key to select all Appointment Dates for a Patient
or use the F9 key to make selections from an Appointment Date list
or use the F7 key to search the Patient list.
```

Figure 15-20. Asterisk at Selected Patient

12. Select (P)rint selections, (M)ore selections, or (Q)uit:

Type **P** to print the information you selected from the picklists, or

type M to return to the picklists to change your selections, or

type **Q** discard any selections and return to the Ambulatory Data Reports Menu.

The (P)rint option displays only if the picklist has active selections.

10. Do you want to proceed with this report? No//

Type **Y** to proceed, or

type **N** to discard the selection made and return to the previous prompt.

11. This may be a COMPLEX report. Please queue it to print during the night or other non-peak hours. Printing it NOW may impact other users on the system.

Do you want to proceed with this report?

Type **Y** to proceed.

12. Queue to DEVICE:

Enter the name of the output device.

13. Select (M)ore selections, or (Q)uit:

Type M to make more selections, or

type **Q** to exit and return to the Ambulatory Data Reports Menu.

### 15.12. User Prompt Style (STYL) Option

The User Prompt Style (STYL) option allows users to select the preferred appearance of their prompts. This option is only available in applications that are "Prompt Style Aware."

Any user may specify the prompt style. The user may either use the system default or specify a user setting that is always in effect regardless of the system default setting.

**Note:** Only users who have the "#" FileMan access code may set the prompt style of the system default. Changes to the default affect all users who are using the system default as their setting.

### 15.12.1 FileMan Prompt Style

A prompt ends with a colon and a space (: ). A default displays as text after the colon, followed by two slashes(: default//). Valid inputs to the prompt are enclosed within parentheses. To make a specific choice, type one of the valid inputs, then press **Enter>**. Or press **Enter>** to accept the default

#### **EXAMPLE:**

Select (C)linic, (P)rovider as primary sort or (Q)uit: P//

Type **Q** for (Q)uit to return to the previous prompt, application, or menu; or type ^ to exit the current application and return to the previous application or menu; or press **<Enter>** to accept the default of "P" for (P)rovider; or type **C** for (C)linic.

Various forms of HELP are available. Type ?? to display help text that explains the different types of help and how to activate them.

#### 15.12.2 Window Prompt Style

Use of the Window prompt style requires the DMS STACK\_SIZE parameter to be set to a value of at least 15K.

The Window prompt style looks like a series of small windows arranged from left to right. Each window has a label. One letter within each label represents the key to press to choose that window. A title line, tip text, and the line of windows may display. The default choice always displays with a brighter background than the rest of the choices. For example:

Select as your primary sort

Clinic Provider Quit eXit Help

Select provider as the primary sort.

The left- and right-arrow keys change the default to the right or left and wrap around to the opposite end of the prompt if necessary. Press **<Enter>** to accept the default of **P** for provider. Press any one of the highlighted characters, a question mark (?), or a carat (^) to choose the action, as shown in Table 15-5.

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Table 15-5. Window Actions

Selection	Action
Clinic	Primary sort by clinic.
Provider	Primary sort by provider.
Quit	Return to the previous prompt, application, or menu.
eXit	Exit to the previous application or menu.
Help	Display all Help text.
^	Return to the previous prompt, application, or menu.
?	Display specific help for the default selection.

### 15.12.3 Use the System Prompt Style Default

If you use the system prompt style as your setting, your prompt style changes when the system prompt style is changed. Only users with the # FileMan access code can change the system prompt setting.

### 15.12.4 Set the System Prompt Style Default

The system prompt style setting toggles between the FileMan and Window styles each time this action is taken.

1. If you are currently using the system default style:

Select (F)ileMan, (W)indows as your prompt style or (Q)uit: W//

Type **F** to specifically set your prompt style to FileMan, or

type W set it for the Windows style, or

type **Q** to leave your setting unchanged.

This setting does not change if the system default is changed.

2. If you are currently using your own setting:

Select (W)indows, System (D)efault as your prompt style or (Q)uit: W//

or

Select (F)ileMan, System (D)efault as your prompt style or (Q)uit: F//

Type **F** to specifically set your prompt style to FileMan, or

type W set it for the Windows style, or

type **D** to clear your specific prompt style and use the system default prompt style.

3. Type **Q** to return to the Ambulatory Data Reports Menu.

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### **Appendix A.** Acronyms and Abbreviations

#### Acronym/Abbreviation

#### **Definition**

ADM Ambulatory Data Module

ADS Ambulatory Data System

**ADSI** Ambulatory Data System Interface

**Appointment Statuses** 

**ADMIN** Administrative Error

C Cancelled

**LWOBS** Left Without Being Seen

NS No Show

**APV** Ambulatory Procedure Visit

**CARD** Cardiology

**CHCS** Composite Health Care System

**CITPO** Clinical Information Technology Program Office

**CONUS** Continental United States

**CPT** Current Procedural Terminology

**CPU** Central Processing Unit

**DMIS** Defense Medical Information System

**DMIS ID** Defense Medical Information System Identification

**DoD** Department of Defense

**DX** Diagnosis

**E&M** Evaluation & Management

**EOD** End of Day (as in end-of-day processing)

**FCUO** For Clinic Use Only

**HCPCS** Health Care Financing Administration Common Procedure Coding

System (CPT/HCPCS)

**ICD-9-CM** International Classification of Diseases 9<sup>th</sup> Revision Clinical

or ICD-9 Modification

**IMM** Immunization/Skin Test Enter/Review

**IPC** Individual Patient Check-in

**ITS** Immunization Tracking System

**IV** Intravenous

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#### Acronym/Abbreviation

#### **Definition**

**KG** TMSSC name space. KG is the file directory space within CHCS for

Government-specific development. ("K" in CHCS is used for the

Government transportable front-end system for ADS.)

MCD Multiple Check-in by Default

**MEPRS** Medical Expense Performance Reporting System

MGE Mail Group Edit

MHS Military Health System

MSA Medical Services Accounting (component of the Patient

Administration (PAD) module of CHCS)

MTF Military Treatment Facility; Medical Treatment Facility

**OIB** Outpatient Itemized Billing

OCCSVC Occasional Services

**OCONUS** Outside Continental United States

**ORTH** Orthopedic

**PAD** Patient Administration (module of CHCS)

PAS Patient Appointment & Scheduling (module of CHCS)

**PATCAT** Patient Category

**SADR** Standard Ambulatory Data Report

SCall Sick Call

**SAIC** Science Applications International Corporation

SSN Social Security Number

**SY\_ETU** System Electronic Transfer Utility

**T-CON** Telephone Consult (appointment type)

**Tel Cons** Telephone Consults (appointment status)

TMSSC Tri-Service Medical Systems Support Center

**TPOCS** Third Party Outpatient Collection System

WAM Workload Assignment Module